

INTERACTION MEMBERSHIP APPLICATION

For both full Member and Associate Member applicants, your organization must complete the following application and submit the required supplemental materials to **Burt Blanchard**, Director of Membership.

The supplemental materials for full Members include:
☐ A copy of your organization's by-laws
☐ Articles of Incorporation
☐ IRS Letter of Tax Exempt Status
☐ Most recent Annual Report
☐ Most current Audited Financial Statement
☐ Most current 990
 Three letters of recommendation from the CEO or President of an NGO, PVO, or CSO, on their letterhead, InterAction Members preferred
$\ \square$ A signed copy of Standards Compliance Certification Form for Prospective New Members
The supplemental materials for Associate Members include:
☐ A copy of your organization's by-laws (if applicable)
☐ Articles of Incorporation (if applicable)
□ IRS Letter of Tax Exempt Status (if applicable)
☐ Most recent Annual Report
☐ Most current 990 or Financial Statement
☐ Three letters of recommendation from the CEO or President of an NGO, PVO, or CSO, on their letterhead; InterAction Members preferred
For questions about the InterAction application process, contact Burt Blanchard , Director of Membership.

Last updated November 2020



Section 1: Basic organization and contact information

Please check if you are applying as an InterAction Member or any type of InterAction Associate Member.
☐ InterAction Member – 501c3 registered in the U.S.
☐ InterAction Associate Member – International NGO
☐ InterAction Associate Member – University department
☐ InterAction Associate Member – Think Tank
☐ InterAction Associate Member – Other
Organization Name:
Organization HQ Address:
Organization HQ Telephone:
Organization Website:
Year Founded:
Incorporated in the state of:
Statement of organizational purpose: This may include your mission, vision, and/or strategic goals.
Briefly describe your organizations programs: Include a listing of the location of field offices or regional offices worldwide.
Name of CEO:
CEO Title:
CEO Email Address:
CEO Telephone:
Contact Person: The contact person is the individual the InterAction Membership Team will communicate with regarding all application materials.
Contact Person Title:
Contact Person Email Address:
Contact Person Telephone:



Section 2: Interest in joining InterAction

Why does your organization wish to join InterAction? Please keep your response between 300–500 words.



In the last five years, has your organization been the recipient of a claim or suit (i.e. misappropriation of funds, sexual harassment and abuse, inappropriate board management, etc.) that may draw negative publicity to your organization, the overall perception of the sector, or disqualify you from InterAction Membership based on its Standards? If so, what has been done to resolve any such situation?



How would your staff expect to participate? Check all that apply.

For more information about how InterAction works with our Members, visit <u>our website</u>. Please note that this information is used mainly to guide us in determining what to focus on during your orientation briefing if accepted for membership.

Region-Focused Working Groups

Afghanistan Pakistan

Great Lakes Sahel

Haiti South Sudan/Sudan

Horn of Africa Syria

Iraq Venezuela

Myanmar/Bangladesh West Bank/Gaza

Nigeria/Lake Chad Basin Yemen

Issues-Focused Working Groups

Gender-Based Violence

Climate Protection

COVID-19 Response & Advocacy Public Policy Committee

Communications Directors

Public Policy Committee Budget &
Appropriations Subcommittee

Development Finance Corporation

Appropriations Subcommittee

Public Policy Committee Congressional

Disaster Risk Reduction

Evaluation of Program Effectiveness

Evaluation of Program Effectiveness

Evaluation of Program Effectiveness

Food Security, Nutrition & Agriculture

Shelter & Settlements

UNHCR Partnerships

Forced Displacement
Water Sanitation & Hygiene

Water, Sanitation & Hygiene From Pledge to Action

G7/G20 Advocacy Alliance

World Food Programme Partnerships

Listservs

Disability Social Media

Fragility Strengthening Partnerships
Innovative Finance for Development Sudden-Onset Emergency

Prevention of Sexual Exploitation & Abuse

Initiatives & Partnerships

Basic Education Coalition Results-Based Protection

NGO Futures Together Project



Section 3: Governance Standards and Employee Policies

If you are applying as an Associate Member and do not have a board or governing body, please provide information on your governance and accountability structure.



Section 4: Partnerships



Please list the three organizations who are sending in a letter of recommendation on your behalf:



Section 5: Finances

Dues are based on total expenses confirmed through the audited financial statement and U.S. IRS 990, or corresponding financial information in country of incorporation. We provide deductions for Gifts-in-Kind and domestic-related expenses if more than 30% of total budget. For organizations based outside of the United States, all currency will be converted to U.S. Dollars (USD) in order to calculate dues.

What are your total expenses?

Does your organization have any program(s) that focuses on the United States? If so, what are the total expenses associated with your domestic work?

Domestic only; domestic expense is defined as domestic (U.S.) activities that have no relationship to international activities, programs, or issues.)

Does your organization receive any gifts-in-kind? If so, what is the total monetary value of the gifts-in-kind expensed for the year?