

NGOs REGISTRATION FORM

1.	NAME OF THE ORGANIZATION
2.	ADDRESS OF THE ORGANIZATION	Physical Address:-street, House....., Nearby.....,District,Region, P.O Box.....-.....
3.	LEVEL OF REGISTRATION	1. District..... <input type="checkbox"/> 2. Regional..... <input type="checkbox"/> 3. National..... <input type="checkbox"/> 4. International..... <input type="checkbox"/> Tick appropriate box
4.	THEMATIC AREA OF OPERATION	
5.	VISION STATEMENT	
6.	MISSION STATEMENT	
7.	OBJECTIVES	1..... 2..... 3..... 4.....
8.	TYPES OF MEMBERS	1. Founder Members 2. Ordinary Members 3.
9.	DECISION MAKING ORGAN	1. Quorum

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		<p>.....</p> <p>.....</p> <p>2. Powers and functions of Decision Making Organ</p> <p style="margin-left: 40px;">a)</p> <p style="margin-left: 40px;">b)</p>	
10.	DISSOLUTION	<p>1. The Organization may be dissolved by resolution passed by the Decision making organ.</p>	
11.	LIST OF MEMBERS/LEADERS	Names	Nationality
		1.....	1.....
		2.....	2.....
		3.....	3.....
		4.....	4.....
		5.....	5.....
		6.....	6.....
		7.....	7.....
12.	<p>Submitted by(Office Bearer/ Director.....</p> <p>this Day of.....20.....</p> <p>Signature.....</p>		

ATTACHMENTS

1. COPY OF PREVIOUS REGISTRATION CERTIFICATE
2. COPY OF TRUST DEED, MERMAT OR CONSTITUTION
3. CV OF LEADERS, EACH CV WITH 2 PASSPORT SIZE PICTURES