

Application form for NGO











INTRODUCTION

This form is a document of reference that will help you to prepare your NGO registration, it is **NOT valid to register it.**

In order to register your NGO, you must enter the SELAVIP Project Management System (https://application.selavip.org) and fill in the online form to register your NGO. Once registered, you will be able to submit a project in the online form as long as and when the call for new projects is open. The application dates will be communicated through the SELAVIP website (https://selavip.org) and the SELAVIP Project Management System.

Due to the high demand and interest in participating in our calls to apply for projects to finance emergency housing, water systems, sanitation and land regularization, we want to inform all non-profit **ORGANIZATIONS** that **ARE NOT REGISTERED** in our System, that registrations will be open only until **March 31**. Any NGO registration that is carried out after that date will not be able to participate in the current call to submit projects.

The process of Review and Activation of Organizations will be resumed once the application process is finished, that is, on July 1.

This is an open invitation to register NGOs (organizations working in developing countries and poor urban communities). Once your non-governmental organization is registered you will then be able to present your project(s) once the call for new projects is open. Only NGOs registered through this system will be reviewed and considered in the application process.

All the information you provide is for SELAVIP use only. The information may be used by SELAVIP for internal purposes (reports, etc.). It is important to emphasize that the NGO registration in SELAVIP's system does not necessarily mean receiving any contribution from SELAVIP.



GENERAL INFORMATION

NGO'S NAME *	MAIN PHONE *
Organization full name or corporate name.	
ORGANIZATION INITIALS	OTHER PHONES
The initials of the NGO.	
COUNTRY *	MAIN MOBILE PHONE *
Select a value	
CITY *	OTHER MOBILES
	MAIN EMAIL *
DEPARTMENT, STATE OR REGION *	
	OTHER EMAIL
DISTRICT, MUNICIPALITY OR COMMUNE *	
	WEBSITE
POSTAL CODE	Enter the website including the http or https protocols, for example: http://www.example.com
ADDRESS *	FACEBOOK
	Enter the full url of the NGO facebook account, for example: https://www.facebook.com/MY-NGO



TWITTER	ID SKYPE
Enter the full url of the NGO twitter account, for example: https://twitter.com/MY-NGO	
INSTAGRAM Enter the full url of the NGO instagram account, for example: https://www.instagram.com/MY-NGO	Select file If you have a logo, please attach it One file only. 2 MB limit. Allowed types: png gif jpg jpeg.
2 LEGAL INFORMATION ID REGISTRATION NUMBER	LEGAL REPRESENTATIVE NAME *
	Mention the name of the person entitled to sign agreements
LEGAL REGISTRATION DATE *	LEGAL REPRESENTATIVE NATIONALITY *
DOCUMENTS (BYLAWS, AUTHORITIES' CERTIFICATE) * What supporting document does the jurisprudence certify?	LEGAL REPRESENTATIVE ID NUMBER *
Add A new file	
Select file	NAME OF THE EXECUTIVE DIRECTOR
Unlimited number of files can be uploaded to this field. 5 MB limit. Allowed types: doc docx odt pdf txt ppt jpg jpeg gif png.	



DOES YOUR ORGANIZATION COUNT WITH A BO	OARD OF DIRECTORS *
○ No	
Yes	
If the answer above is "Yes", you should answer the following quest	ions:
PRESIDENT'S NAME	SECRETARY
VICE PRESIDENT	TREASURER
3 EXPERIENCE	
YEAR OF CREATION *	ORGANIZATION HISTORY *
ORGANIZATION TYPE *	Briefly explain the history of your organization (the reasons why it has ben created, the highlights, and others)
Cocal Community	
○ Non governmental	
Non profit Foundation	
ReligiousOther	
Choose one or more options	
and a second or more options	



SPECIALIZATI	ON AREA						
Education	n		\bigcirc c	Original towns			
Environm	nent			Refugees			
○ Family, y	outh and childrer	ı	○ S	ocial and econom	ic development		
Farming			○ S	ustainable develo	pment		
Feeding			○ V	oluntariado			
○ Health			\bigcirc V	Vater and sanitati	on		
O Human ri				Voman			
Human s	ettlements		○ V	Vork			
Choose one or mor	e options						
SELAVIP PROJ	ECTS						
Name	Year	Duration	Country	Resources provided	Families attended	Туре	
				In \$USD		Select	~
f you have executed	d a project finance	d by SELAVIP in the	past, please mentio	on it.			
PROJECTS EXE	ECUTED WITH	OTHER NGO	'S				
Name	Year	Duration	Country	Resources provided	Families attended	Туре	
				In \$USD		Select	~
lousing projects ca	ırried out with othe	r organizations					
QUANTITY OF DRGANIZATIO	INDIVIDUAL	S IN THE	PEC	PLE WORKIN	G IN THE FIEL	_D *	
			This	number considers ti	he workers employ	ved and naid	hy the
	ne higher than Peop ad / or professional	ole working in the fi		nization, working in			
			TEC	HNICIANS AN	D / OR PROF	ESSIONAL	_S *



4 RESOURCES	
BUDGET OF TWO YEARS AGO *	DO YOU HAVE ONE OR MORE VEHICLES? *
	○ No
USD	○ Yes
LAST YEAR TOTAL BUDGET *	If the answer above is "Yes", you should answer the following questions:
LAST TEAR TOTAL BODGET	HOW MANY VEHICLES? *
USD	
CURRENT YEARLY BUDGET *	OBSERVATIONS
USD	
	Comments about your vehicle
DO YOU HAVE AN OFFICE? *	
○ No	DO YOU HAVE COMPUTER EQUIPMENT? *
○ Yes	○ No
If the answer above is "Yes", you should answer the following questions:	○ Yes
HOW MANY OFFICES DO YOU HAVE? *	OBSERVATIONS
OBSERVATIONS	
Comments about your office	



SOURCES OF FUNDING OF YOUR NGO *	DOES THE ORGANIZATION WORK WITH VOLUNTEERS? *
	○ No
	○ Yes
	If the answer above is "Yes", you should answer the following questions:
	COMMENTS ABOUT YOUR VOLUNTEERS' POLICY
5 BANK INFORMATION	
	ACCOUNT NUMBER *
BANK NAME *	ACCOUNT NUMBER *
BANK NAME * Maximum 50 characters	ACCOUNT NUMBER * ACCOUNT HOLDER *
BANK NAME * Maximum 50 characters	
BANK NAME * Maximum 50 characters BANK ADDRESS * BANK CITY *	ACCOUNT HOLDER *
BANK NAME * Maximum 50 characters BANK ADDRESS *	ACCOUNT HOLDER * El titular de la cuenta debe ser su ONG



ABA NUMBER	
IBAN NUMBER	
BANK BRANCH CODE	
DAIN BIAIVET CODE	

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