

Member Agency Application Form 2024

Before filling out this form, please ensure that you have read the 2024 Member Agency Funding Guidelines.

Member Agency Information:

Agency Name:									
Address:									
Town/City:						Posta Code:			
Phone:					Fax:				
Website:									
Executive Director:				Email:					
Incorporated Ch	naritabl	e Registratio	on Name:						
CRA Charity Registration #:						Fiscal Y End:	'ear		
# of Full-Time St	aff:			# of	of Part-Time Staff:				
How much liabil	lity insu	irance does	your agency	/ carry?					
Is the agency su	pporte	d by a sound	d financial p	lan for a l	positive futu	ure outlo	ook?	□ yes	🗆 no
If your organization has a surplus for dedicated reserves or operational reserves, please describe your policy with regard to amounts. Does your agency have any other surplus or deficit? If there is a surplus, how will it be used? If there is a deficit, how will it be cleared?									
What is the tota		• •					<u> </u>		

Provide a brief overview of the agency and the wo	Provide a brief overview of the agency and the work that it does:				
Disease list the name and nasition of all montheme	Disco list the name and notition of the tan				
Please list the name and position of all members of the agency's Board of Directors:	Please list the name and position of the top members of the agency's senior staff:				
Describe how the agency collaborates with other a had this collaboration:	gencies and organizations and how long you have				
Describe the measures your agency takes to make sure it is fully accessible to the community:					

Involvement

Does the agency agree to display the United Way si	🗆 yes 🗆 no			
Does the agency agree to provide a guest speaker a	🗆 yes 🗆 no			
Does the agency agree to attend member agency u	Does the agency agree to attend member agency umbrella meetings?			
Does the agency agree to attend the United Way A	nnual General Meeting?	🗆 yes 🗆 no		
Does the agency agree to attend the Campaign kick	c off?	🗆 yes 🗆 no		
Does the agency agree to volunteer at special even	ts when requested?	🗆 yes 🗆 no		
Does the agency agree to acknowledge funding from and Norfolk during every community presentation/	-	🗆 yes 🗆 no		
Please check the following ways your agency is will Norfolk's logo:		laldimand and		
Letterhead	Annual Report			
Brochure	□ Advertising			
□ Newsletter	□ Web site			
What will the agency do to recognize/support United Way of Haldimand and Norfolk?				

Eligibility

For an agency to be considered for funding, all of the eligibility requirements must be met in the sole opinion of United Way of Haldimand and Norfolk.				
1.	Is the agency a registered charity?	🗆 yes 🗆 no		
2.	Does the agency have a volunteer Board of Directors?	🗆 yes 🗆 no		
3.	Is the agency in receipt of a Notice of Breach of any existing contracts with United Way of Haldimand and Norfolk?	🗆 yes 🗆 no		
4.	Is the agency committed to comply with all Ontario Human Rights Legislation?	🗆 yes 🗆 no		
5.	Can the agency confirm that any funding received will not be used to duplicate existing funding, pay a pre-existing debt, or to pay for any liabilities incurred before any funding agreement has been signed?	🗆 yes 🗆 no		
6.	If the agency has received funding from United Way of Haldimand and Norfolk in the past, has the agency demonstrated a history of accountability in meeting terms and conditions of previous allocations?	🗆 yes 🗆 no		
7.	Has your agency attached the most recent audited financial statements?	🗆 yes 🗆 no		
8.	Has the agency attached the most recent annual report?	🗆 yes 🗆 no		
9.	Does the agency agree to submit future audited financial statements and annual reports during the life of this funding agreement if receiving multi-year funding?	🗆 yes 🗆 no		
10.	Has the agency demonstrated sound management and governance practices?	🗆 yes 🗆 no		
11.	Is the agency able to respond to community needs if and when they arise?	🗆 yes 🗆 no		
12.	Is the agency willing to complete mandatory reporting?	🗆 yes 🗆 no		
13.	Is the agency willing to share information for marketing purposes with United Way of Haldimand and Norfolk?	□ yes □ no		
14.	Has the agency demonstrated effective use of resources (financial and human resources)?	□ yes □ no		

15. Does the agency agree to abide by the Agency Fundraising Agreement as written in the 2023 Member Agency Funding Guidelines?	□ yes □ no
16. Does the agency agree to abide by the Sub-License to use United Way of Haldimand and Norfolk marks as written in the 2023 Member Agency Funding Guidelines?	🗆 yes 🗌 no

Verification:

Can you verify that all of the information listed in the agency's entire				🗆 yes 🗆 no	
applica	application is correct and true to your knowledge?				
Name of Legal Signatory signing on behalf of the					
agency	/:				
Title:				Date:	
Signatı	ure:				