**UNCAC COALITION – MEMBER ORGANISATION APPLICATION FORM**

Membership type: (National or International Member Organisation)  
  
Organisation name:   
  
Type of organisation: (Non-profit organisation, University, etc)  
  
Organisation description:   
  
Region:   
  
Country:   
  
Address:   
  
Contact person:   
  
Job title of contact person:   
  
Email address of the contact person:   
  
Email address of the organisation:   
  
Website:  
  
Phone number:   
  
ECOSOC-accredited?   
  
In good standing?   
  
Operating languages:   
  
Organisation's main anti-corruption activities:   
  
Organisation’s main activities with UNCAC:   
  
Policy areas:   
  
Recent anti-corruption publications:  
  
Charter: (please attach or include hyperlink)  
  
Registration certificate: (please attach or include hyperlink)  
  
Audited accounts: (please attach or include hyperlink)  
  
Annual Report: (please attach or include hyperlink)  
  
How can the UNCAC Coalition help in your work?   
  
How would you like to support the UNCAC Coalition?   
  
What are your expectations of the Secretariat of the UNCAC Coalition?:   
  
Would you like to provide any financial support to the UNCAC Coalition?   
  
On behalf of my organisation I hereby agree with the Coalition’s beliefs and standards including accountability, transparency, integrity and mutual support, and understand my obligations as a member including the submission of an annual update to the Coalition secretariat. (AGREE/DISAGREE)  
  
On behalf of my organisation I hereby agree with the mission, aims, vision, and working principles described in the UNCAC Coalition Constitutive Document. (AGREE/DISAGREE)  
  
On behalf of my organisation I hereby agree with the Charter of the Association. (AGREE/DISAGREE)  
  
On behalf of my organisation I accept the terms and conditions. (AGREE/DISAGREE)  
  
Additional information you would like to share: