

**SHE-COOPSTM
MOVEMENT**

**THE WORLD'S BIGGEST
VOICE CHAMPIONING
WOMEN'S COOPERATIVE
DEVELOPMENT**



COVID-19 ADOPT-A-WOMEN COOPERATIVE PROGRAM

ASSESSMENT FORM



As a movement, we have a collective responsibility to take the needs of our Women into account and ensure that Vulnerable Women Cooperatives around the World who have lost out and impacted by the pandemic has the resources to recover and build back better.



Promoting Cooperative Rights for Women.



Women in Cooperative International
The Networking & Resource Organization for Cooperative Women



building sustainable societies through cooperation.

SHECOOPSTM

ADOPT-A-WOMEN CO-OP PROGRAM

(A COVID-19 RAPID RESPONSE FUNDING PROGRAM FOR WOMEN CO-OPERATIVES)

Participation in the Adopt-A-Women Co-operative Program is based upon assessment of the impact of the Coronavirus Pandemic on a Co-operative. Filling out the remainder of this form and providing supporting documents will allow the applicant to be considered for admission into the program.

Name of Co-operative Organization

Address of Co-operative Organization

Address Ln1

Address Ln2

Address Ln3

Address Ln4

Town/City

Post Code

Country

Certificate No:

Telephone

Email

Website

Main Contact Person

(These are the details that will be used for correspondence purposes)

Title

First name

Surname

Role

Daytime Tel:

Evening Tel:

Email:

Mobile Nos:

Fax No:

AFFIX
PASSPORT

Alternative Address if different from Organizations Address above.

Address Ln1

Address Ln2

Address Ln3

Address Ln4

Town/City

County

Email

Note: *The information required in this section may not in some circumstances capture all relevant information regarding your contact address because of the Country you live. Thus to enable shecoops provide Adopters with credible information concerning this Section, kindly provide those vital information you may feel useful to contact you or the Co-operative that is not captured here in Section A.*

SECTION B

What is your organizations structure.....

What type of Co-operative are you or what types of Co-ops do you represent.....

What sectors of the economy do you operate in.....

When was the Cooperative established:.....

How many Members does the Co-operative currently have.....

Does this Co-operative have a Bank Account? if yes, provide details.....

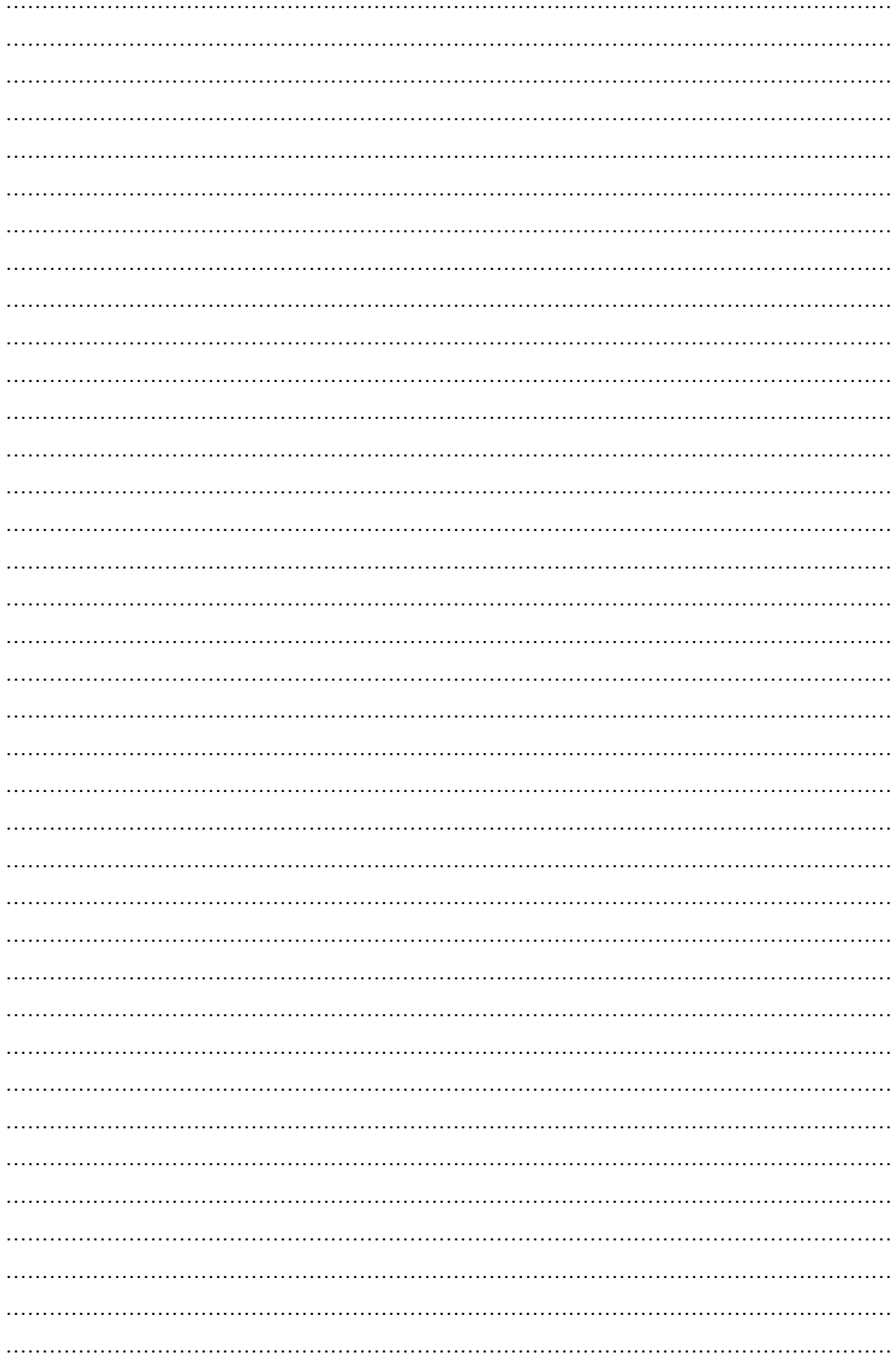
Can you provide Bank Statement of the Account in the last 1 Year.....

To participate in this program, a Co-operative needs a Domiciliary Account. Does your Co-operative have a Domiciliary Account? If Yes, provide details.....

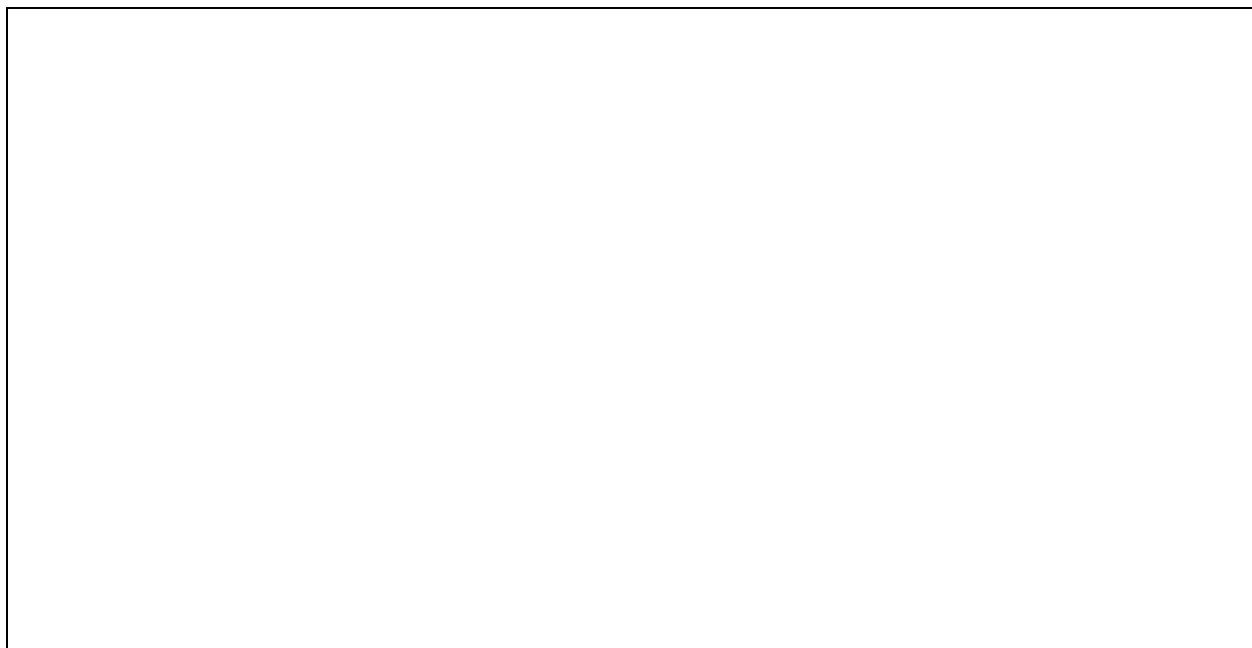
How are you sure Women will be assisted through this initiative.....

How do you intend to use the funds to assist members of the Co-operative, if Adopted?.....

How did you hear about the Adopt-A-Women Cooperative Program.....



Picture showing members of the Co-operative with their face masks and maintaining Social Distance.



INSTRUCTIONS:

As the world's biggest voice championing Women Co-operatives Development, She-Coops have launched two global platforms for helping Women Co-operatives mitigate the impact of the Corona virus Pandemic. Women Co-operatives from more than **105 Countries** will be participating in this program and therefore we must not misinform the public with information provided here.

The Adopt-A-Women Co-operative Program is open to all Women Co-operatives around the world from Sub-Saharan Africa – South/East Asia & Pacific – Caribbean - Middle East & North Africa - Latin America. This program relies on the support and goodwill of the over 1 billion cooperators and 3 million Co-operatives, corporate partners, donor organizations, philanthropists, multi-lateral agencies and individuals around the world.

Adopters are provided credible, verified and accurate information to reach a Co-operative **directly**. No donation is made **through** She-Coops on the behalf of a Co-operative. Any Co-operative that provides false information shall be disqualified from the program.

She-Coops does NOT provide FUNDING to any Co-operative. It will not also take responsibility if a Co-operative is unable/fails to get assistance on the Adopt-A-Women Co-operative Program.

She-Coops shall present Women-only Co-operatives for Adoption and not mixed Co-operatives OR Co-operatives with male co-signatory. Submit completed forms to: shecoopscovid19rrfp@shecoops.org. Deadline for submitting assessment form is Friday, 31st July, 2020.

SUPPORT DOCUMENTS:

- (A) Provide a copy of Co-operative Certificate of Registration,
- (B) Bank Statement for 1 Year,
- (C) List of Members on Membership Register
- (D) Minutes of Meeting/Resolution showing approval of members for the Co-operative to participate in Adopt-A-Women Co-operative Program.

REFERENCES:

Please list three persons as references who are not members of your Co-operative/group

Name	Rank/Position	Telephone Number	Address	Signature

ACKNOWLEDGEMENT:

I.....the primary contact person forconfirm that I have the required authority to act for and on-behalf of my Co-operative/group in making the foregoing application. I acknowledge that all the information provided in this assessment form is true and accurate to the best of my knowledge. I understand that any material mis-statement or omission of material facts may disqualify our Co-operative from being listed for Adopt-A-Women Co-operative Program or terminate any support from a potential Adopter.

.....
Date

.....
Signature

THIS FORM IS FREE