

# PASTORALIST FORUM ETHIOPIA (PFE)

## Members BASIC INFORMATION

Membership (dd/mm/yy) \_\_\_\_\_

1. Name of the NGO: \_\_\_\_\_  
(Same as it appear in the Registration Certificate)

2. Acronym (if any): \_\_\_\_\_

3. Date founded (Date/Month/Year)

1. In the country of origin: \_\_\_\_\_  
(Applicable only for International / NGOs)

2. In Ethiopia: \_\_\_\_\_

4. Type of the NGO (please tick in front of an appropriate one)

4.1 Indigenous Non-religious

4.3 International Non-religious

4.2 Indigenous Religious

4.4 International Religious

4.5 other: specify \_\_\_\_\_

5. Organization's current address

5.1 Mailing Address: \_\_\_\_\_

5.2 Telephone: \_\_\_\_\_

5.3 Fax: \_\_\_\_\_

5.4 E-Mail: \_\_\_\_\_

5.5 Location of the head office in Ethiopia \_\_\_\_\_

6. Brief description of the organization  
(Please state briefly the vision and mission statement of the organization and  
program focus of its existing activities)

Vision

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Mission

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Program focus/intervention area

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7. Please indicate the NGOs main sources of income in order of importance

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8. Brief description of the structure of the NGO and its decision making process

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9. Names and position of board members

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10. Please indicate the organization's current annual budget

ETB:
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11. Brief description of accounting system of the NGO (please also indicate the type of the bank account and the signatories of your bank account).

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12. Indicate the major assets and facilities you have (including office, equipment furniture, transport and communication)

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13. Please indicate the total number and position of your employees

- a) Total: \_\_\_\_\_
- b) Technical: \_\_\_\_\_
- c) Support: \_\_\_\_\_
- d) Others (specify): \_\_\_\_\_

14. Name of partner organizations

- 1. Local: \_\_\_\_\_
- 2. National: \_\_\_\_\_
- 3. International: \_\_\_\_\_

15. Please state the main reason(s) for which your organization has decided to be a member of PFE

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16. Please indicate briefly how the NGO intends to contribute to the work of PFE

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17. Please indicate other similar institution(s) of which your organization is already a member

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Name of the head of the NGO: \_\_\_\_\_  
Submitting the information

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**(Stamp)**