



NATIONAL COALITION OF HUMAN RIGHTS DEFENDERS APPLICATION FORM

A. ORGANISATIONAL/PERSONAL DETAILS

- a) Name of organization/individual
.....
- b) Address
.....
.....
- c) Telephone.....
- d) Email address.....

B. ORGANISATION PROFILE

- a) Year of establishment
- b) Organization mission and vision
- c) Area of Focus e.g. child rights, women, governance etc.

(Kindly attach certified copies of NGO registration, profile (Brochure), organogram)

C. OTHER CONTACTS

- e) Next of Kin/Emergency contact i.e name, telephone, email

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.....
.....

D. COMMITMENT

I/we the above named person/organization are/is desirous of becoming part and member of the National Coalition on Human Rights Defenders Uganda. We/I believe in the promotion, protection of the safety and security of HRDS in Uganda. To this effect we/I pledge to cooperate, support all HRDs under the coalition in the best way we/I can. We/I pledge to abide by the coalition Constitution, Code of Conduct and any other instruments that guide the operation of the coalition.

Signed Date

E. FOR OFFICIAL USE

Approved by

National Coalition for Human Rights Defenders (NCHRDU)
C/o Human Rights Network Uganda (HURINET-U).
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