**International Guide Dog Federation (IGDF)**

Company no: 2376162. Registered Charity no: 1062441

**APPLICANT ORGANISATION APPLICATION**

THIS APPLICATION FORM IS TO BE COMPLETED IN ENGLISH

I hereby apply to become an Applicant Organisation of The International Guide Dog Federation (“IGDF”) on behalf of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of Organisation/Foundation

|  |  |  |
| --- | --- | --- |
| 1. | Name of Applicant: |  |
|  | Position:  |  |
|  | Address: |  |
|  |  |  |
|  |  |    |
|  | Post Code: |  |
|  | Country: |  |
|  | Telephone Number:(include Country Code) |  |
|  | Facsimile Number:(Include Country Code) |  |
|  | E-mail address:  |  |
|  | Website: |  |
|  | Second contact name: |  |
|  | Second contact telephone number: |  |
|  | Second contact email address: |  |
| 2. | Have you previously applied for Membership of the IGDF? | **YES / NO** |
| 3. | Date of legal entity/ incorporation (Please enclose a copy of your registration documents): |  |

|  |  |  |
| --- | --- | --- |
| 4. | Are you currently developing a guide dog service?  | **YES / NO** |
| 5. | Are you currently providing other types of assistance dogs?If yes, what types \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **YES / NO** |
| 6. | Have you produced at least one working Guide Dog Team which has worked for 1 month in your country? | **YES / NO** |
| 7. | Did your organisation directly train the Guide Dog Team? | **YES / NO** |
| 8. | If the answer to question 7 is no, which IGDF Member organisation trained the team? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­  |  |
| 9. | Do you employ or contract a Guide Dog Mobility Instructor who qualified with an IGDF Member Organisation? | **YES / NO** |
| 10. | Do you provide Guide Dog follow-up services? | **YES / NO** |
| 11. | If the answer to question 10 is no, who is providing the follow-up services? |  |
| 12.  | Do you have a 3 year business plan?- If yes, please enclose a copy of your business plan, in English- If no, you will need to develop one before your application can be accepted. The IGDF Development Committee can offer guidance on creating one. | **YES / NO** |
| 13. | Are you financially sustainable?- If yes, please enclose a copy of your financial plan, in English- If no, how do you plan to sustain your organisation?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **YES / NO** |
| 14. | Do you have access to dogs suitable for guide dog work?  | **YES / NO** |
| 15. | If the answer to question 14 is yes, where are they coming from (e.g. breeding program, other Guide Dog schools, private breeders, etc.)? |  |
| 16. | Have you read the IGDF standards and are you committed to working towards achieving those standards within 5 years? | **YES / NO** |

|  |
| --- |
| CHECKLIST (Please tick the box if the required information is included. If any information is not available your application cannot be processed). |
|  |  |  |  |  |
| 1. | Legal entity registration (for non-English speaking countries, the registration documents can be submitted in your language, however, the title and a brief description of these documents are required in English). |  |  |  |
|  |  |  |  |  |
| 2. | 3 year business plan (in English). |  |  |  |
|  |  |  |  |  |
| 3. | Financial plan for continuing sustainability (in English). |  |  |  |
|  |  |  |  |  |
| 4. | A total of 30 minutes of video of 1 guide dog team allocated by your organisation working on 3 different known routes each of approximately 10 minutes. (i) Local home area, (ii) Local shopping precinct and (iii) Busiest route normally used.  |  |  |  |
|  |  |  |  |  |
| 5. | A brief report on the guide dog team shown in the videos |  |  |  |
|  |  |  |  |  |
| 6. | Copy of a contract/agreement between the organization and a qualified GDMI on provision of support |  |  |  |
|  |  |  |  |  |

I confirm that we will pay £200.00, upon receipt of the invoice.

|  |  |
| --- | --- |
| Signed: |  |
| Name in Full: |  |
| Position: |  |
| Date: |  |