Template: Community-Based Organization (CBO) Information

This template is designed for GBV programs to collect initial information about potential programming partners in humanitarian settings. Questions can be adapted and largely relate to community-based organizations, including women-led organizations (WLO) and women’s rights organizations (WRO). Questions highlighted in pink can be addressed to more informal women’s associations. Note that information captured here will not be sufficient for program planning, which should involve a collaborative process foundational to an equal partnership.

**Name**

Please provide the full name of your organization

**Registration**

Is your organization registered? Please provide information on registration: date, type of organization, validity of registration

**Leadership**

Who leads your organization? Please explain if the organization is led by a single person, a committee, or a different structure. Please also indicate if the leadership is composed of men, women, a combination of women and men, and if the leadership includes any children.

**Key Contact**

Please provide key contacts for your organization, including full names, titles, phone, e-mail, business address

**Management Structure**

Please provide information on how your organization is managed. Is there a management board? What does the organigram look like?

**Partners**

Does your organization have formal partnerships with any other implementing organizations?

**Donors**

Have any donors recently supported your organization? Which ones?

**Geographic Coverage**

Where does your organization work? How many communities/people does your organization reach in its area/s of operation?

For areas of operation relevant to potential partnership, please provide information below on your membership.

|  |  |  |  |
| --- | --- | --- | --- |
| **Staffing/Volunteer Information** | Total Number | Female | Male |
| Paid, full-time members |  |  |  |
| Paid, part-time members |  |  |  |
| Working volunteers (indicate average hours of work per week) |  |  |  |
| Affiliated members (not contributing to work) |  |  |  |

**Mission and values?**

What is the overall mission of your organization? What is your cause

**Type of Work**

What major sectors of work does your organization engage in? For example, are you focused on health? Livelihoods? Assistance to children? Women’s rights?

**For Women and Girl-Focused Organizations**

Please indicate which activities best describe the focus of your organization (check those that relate to major activities).

* Advocacy to reform laws/policies
* Raising awareness of women’s or girls’ rights within communities
* Stopping specific practices that harm women or girls
* Raising funds/donations for vulnerable women or children
* Savings or loans associations of women
* Training women or adolescent girls in new trades/livelihoods
* Informal education/literacy for women or girls
* Recreational activities for women or girls
* Support for women affected by domestic violence
* Support services for women and girls affected by violence in the community/conflict
* Support services for children
* Other

Please include more specific information below if offered:

**Major Activities**

Please provide information on your current projects, including information on regular activities that are carried out on a daily/weekly/monthly basis.

**Typical Day…**

What would be the responsibilities and activities of an active worker in your organization on a typical day?