

## Request for partnership with PIN Ukraine

### Application form

Please fill out this form and send it to: [anna.medvedieva@peopleinneed.net](mailto:anna.medvedieva@peopleinneed.net)

Legal name of organisation	
Legal form	
Registered office address	
Postal address, if different from registered office address	
Name and surname of the representative	
Position	
Email	
Telephone number	
Website, social media pages links (if available)	
Do you confirm the organisation has no political affiliations?	<i>Please select YES or NO only</i>
Do you have any affiliation with the Armed Forces of Ukraine?	<i>Please select YES or NO only</i>
Sectoral Focus	<input type="checkbox"/> <b>Food Security</b> (for example, distribution of food kits) <input type="checkbox"/> <b>NFIs</b> (for example, blankets, utensils, beds) <input type="checkbox"/> <b>Shelter</b> (for example, repairs, reconstruction) <input type="checkbox"/> <b>WASH</b> (for example, distribution of hygiene kits, provision of emergency water supplies, rehabilitation of water supply systems) <input type="checkbox"/> <b>Protection</b> (for example, PSS, evacuation) <input type="checkbox"/> <b>Education</b> <input type="checkbox"/> <b>Other sectors</b> _____

<p>Strategic focus (organisation's vision for the coming months and years; strategic target groups)</p>	
<p>Current geographical outreach (list key locations only)</p>	<p><input type="checkbox"/> Region / District Name _____  City / Village Name / _____  Please list all locations _____</p>
<p>What is your vision of and expectation from a partnership with PIN Ukraine?</p>	
<p>Please specify the sectors of work, locations, categories and estimated numbers of beneficiaries, and time frames of your potential project with PIN</p>	