

**Alaska Community Share  
MEMBERSHIP APPLICATION**

*Please Print:*

Name of Organization \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Website \_\_\_\_\_ email \_\_\_\_\_

**Does your organization meet the minimum criteria listed here?**

*Please mark either yes or no after each question.*

	<b>Yes</b>	<b>No</b>
Does your organization have a regional and/or statewide focus? What region if not statewide? <b>REGION:</b>	<input type="checkbox"/>	<input type="checkbox"/>
Is your organization recognized by the IRS as a 501(c)(3) organization? (For the last two fiscal years?)	<input type="checkbox"/>	<input type="checkbox"/>
Does your organization fit into one of these categories? Social, health, arts, economic, educational or environmental?	<input type="checkbox"/>	<input type="checkbox"/>
Is your organization dedicated to solving community problems/issues in innovative ways?	<input type="checkbox"/>	<input type="checkbox"/>
Does your organization have an all volunteer board of directors?	<input type="checkbox"/>	<input type="checkbox"/>
Is your organization <u>unaffiliated</u> with any other workplace giving umbrella?	<input type="checkbox"/>	<input type="checkbox"/>
Is your organization incorporated in the State of Alaska, for at least the last two fiscal years?	<input type="checkbox"/>	<input type="checkbox"/>
Does your organization meet the standards of participation for either an Affiliate or Full member as listed in the "Standards of Participation for Members"?	<input type="checkbox"/>	<input type="checkbox"/>

*If you answered no to any of the above or if there are any problems or concerns with regard to your organization meeting any of the listed criteria, please explain on the back of this application.*

\_\_\_\_\_  
Signed / Title

\_\_\_\_\_  
Date

If your organization answered yes to these questions then please address the following items, as thoroughly and concisely as possible, in a letter addressed to the Membership Committee of Alaska Community Share. Thank you and we look forward to reviewing your application.

**Question to address in a Letter of Application to the Membership Committee of Alaska Community Share:**

1. Why does your organization want to join Alaska Community Share?
2. In what way(s) will your organization enhance the fundraising capabilities of Alaska Community Share?
3. Alaska Community Share requires each member group to provide a person to sit on a committee and contribute at least 20 hours in volunteer time (annually) to assist with the organizational workload. Can your organization fulfill the work requirement? If so, state what volunteer or in-kind resources your organization has available to Alaska Community Share.
4. Does your organization receive more than 80% of its funding from governmental sources? If so, please list (separately) the types of funding and sources.
5. All participating Alaska Community Share agencies must offer an inter-agency workplace payroll deduction program. Can your organization fulfill this requirement? If no, please explain (your organization is an all volunteer agency and does not have paid staff etc.)

**Please provide copies of the following documents:**

- Membership Application and Letter of Application to the Membership Committee of Alaska Community Share,
- Annual Report from the most recent year,
- Complete copy of Federal IRS Form 990 or equivalent for the most recent year,
- Annual Audit - most recent audited financial statement for income over \$100,000 or un-audited financial statement for funds under \$100,000, **(NOTE: annual report, audit and 990 year need to match)**,
- Articles of Incorporation and By-Laws,
- IRS letter certifying Federal Exempt Status as a 501(c)(3),
- Letter confirming annual filing of charitable organization's Annual Report with the State of Alaska,
- List of current Board of Directors, names, position, and term dates,
- Board meeting dates, time and place, for the past 12 months
- List of exempt staffers include titles and length of employment with your organization, number of non-exempt staff members,
- Copy of your organizations non-discrimination statement,
- Recent brochures, newsletters or other information describing your organization's activities, and
- List of Foundation & Corporate Support.

If you do not have the above documents, please note that on the back of this page and the reason why or that it is forth coming.

**Return signed Application, Letter and documents to:**

Mail to: 

Alaska Community Share Box 103800 Anchorage, AK 99510 907. 258. 4576 voice
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Or deliver to: 

Alaska Community Share 430 West 7 <sup>th</sup> , Suite 117 Anchorage, AK 99501 907. 258. 4576
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## **Criteria for Membership Alaska Community Share**

Each Full and Affiliate member organization must meet all of the following criteria in order to be considered for membership:

1. Have a statewide focus to its program for full membership or regional focus to its program for affiliate membership in the State of Alaska,
2. Be recognized by the IRS as a 501(c)(3) organization,
3. Be a social, health, arts, economic, education or environmental organization,
4. Be dedicated to solving community problems in innovated ways,
5. Have an all volunteer Board of Directors,
6. Be unaffiliated with any other workplace giving umbrella, i.e. United Way, Earth Share,
7. Be incorporated in the state of Alaska as a 501(c)(3) organization, for at least the past two fiscal years, and
8. Meet the standards of participation for full or affiliate membership.

## **Standards of Participation for Full and Affiliate Membership Alaska Community Share**

Alaska Community Share is a cooperative venture and depends upon the participation of its members for its success. The following are required forms of participation of each Alaska Community Share full member organization:

1. Pay a one-time fee of \$500 for full statewide membership, or
2. Pay a one-time fee of \$200 for a regional affiliate membership,
3. Attend membership meetings and campaign kick-offs,
4. Select one representative and one alternative to represent your organization,
5. Express willingness to serve on the Board of Directors if elected,
6. Ability to serve on at least one standing committee, and contribute at least 20 hours in volunteer time or in-kind services annually,
7. Print Alaska Community Share logo on materials (brochures, newsletters, stationary),
8. Participate in all qualifying combined campaigns (such as CFC, State of Alaska Share, Municipal and School District campaigns, etc.),
9. Member organizations shall NOT participate in combined campaigns, at Alaska Community Share worksites, except as a member of Alaska Community Share. If a member organization desires to participate either alone or as a member of another federation, it must resign from Alaska Community Share,
10. Keep accurate and up-to-date financial records and make them available to Alaska Community Share when requested, and
11. Complete yearly membership applications to Alaska Community Share and all Combined Federal Campaigns (CFC's) when requested during the first quarter of the year (materials will be sent in February of each year and will be due in March.)