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YEAR 2006 ACCREDITATION FORM
FOR REPRESENTATIVES OF NON-GOVERNMENTAL ORGANIZATIONS ASSOCIATED
WITH THE UNITED NATIONS DEPARTMENT OF PUBLIC INFORMATION

PLEASE READ BEFORE FILLING OUT FORM

- Non-governmental organizations associated with the United Nations Department of Public Information (DPI) may designate **three** persons to represent them at the United Nations Headquarters in New York. Association with DPI entitles a non-governmental organization to name **one** main representative and **one** alternate representative in addition to the President or Chief Administrative/Executive Officer. Your organization's representatives may be authorized only by the chief administrative officer or elected officials of your organization.
- Representatives are provided with a United Nations photo grounds pass, which allows them access to UN Headquarters. For the 2006 accreditation, passes will be valid from 1 January to 31 December 2006. We encourage representatives to attend the weekly Thursday DPI/NGO briefings, a forum where high-level UN, government and non-governmental officials discuss current issues before the UN, and engage in a dialogue with the audience. These briefings enable NGO representatives to gain information on UN activities for dissemination to their constituents.
- **NGOs are requested to fill out the accreditation form every year.** Organizations that do not intend to have representatives at UN Headquarters should fill out information for their Headquarters and President or Chief Administrative/Executive Officer.
The accreditation form should be returned as soon as possible to:

DPI/NGO Resource Centre
Room L-1B-31
United Nations, New York, NY 10017, U.S.A.
Fax: (212) 963-2819
Tel: (212) 963-7233/7234/7078

- **Please allow a few days for your accreditation form to be processed and forwarded to the Pass & ID Office. Your pass must be obtained in person from the Pass & ID Office on First Avenue at 45th Street, 1st floor, from Monday through Friday between 9 a.m. and 4 p.m.** Their telephone number is (212) 963-7533.

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INFORMATION**

This form should be used to confirm your currently accredited representatives and/or to authorize newly appointed representatives and to update your records with DPI. Please note that designations must be signed by the President or Chief Administrative/Executive Officer of the Organization. Please complete the entire form and return **as soon as possible** to:
DPI/NGO Resource Centre, Room L-1B-31, United Nations, New York, NY 10017, U.S.A.
Fax: +1 (212) 963-2819, Tel: +1 (212) 963-7233/7234/7078

PLEASE TYPE OR PRINT LEGIBLY

UN Affiliation: **DPI** **DPI and ECOSOC** (*Very important, please check relevant box*)

NAME OF ORGANIZATION (*Full Name*):

Headquarters Address (*including country*): _____

Telephone (*including country and area code*): _____

Fax (*including country and area code*): _____

Web Site Address: _____ **E-mail:** _____

PRESIDENT OR CHIEF ADMINISTRATIVE OFFICER

First Name: _____ **Last Name:** _____

Address (*including country*): _____

Telephone (*including country and area code*): _____

Fax: _____ **E-mail:** _____

Representation at United Nations Headquarters in New York

(Please list **one** main representative and **one** alternative representative)

MAIN REPRESENTATIVE

First Name: _____ **Last Name:** _____

Address (including country): _____

Telephone (including country and area code): _____

Fax: _____ **E-mail:** _____

ALTERNATE REPRESENTATIVE

First Name: _____ **Last Name:** _____

Address (including country): _____

Telephone (including country and area code): _____

Fax: _____ **E-mail:** _____

Please indicate which individual in your organization should receive the monthly mailing sent by the DPI/NGO Resource Centre. **PLEASE CHECK ONE ONLY:**

- | | |
|--|--|
| <input type="checkbox"/> Editor of your publication | <input type="checkbox"/> President |
| <input type="checkbox"/> Main representative | <input type="checkbox"/> Alternate representative |

If Editor is indicated above, please provide his/her details below.

First Name: _____ **Last Name:** _____

Address: _____

Telephone (including country and area code): _____

Fax: _____ **E-mail:** _____

Signature of President, Chief Administrative Officer or Authorized Representative:

Printed name and signature

Date

Subjects/Main Area(s) of Interest

Please indicate your organization's main area(s) of interest below.

Mark the **main area** with “1” and mark up to **four** additional areas your organization works in with “T”

Areas of Interest		
<input type="checkbox"/> Ageing	<input type="checkbox"/> Environment	<input type="checkbox"/> International Peace and Security
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Family	<input type="checkbox"/> Population
<input type="checkbox"/> Atomic Energy	<input type="checkbox"/> Food	<input type="checkbox"/> Poverty Issues
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<input type="checkbox"/> Children	<input type="checkbox"/> Health	<input type="checkbox"/> Religion, Freedom of Beliefs
<input type="checkbox"/> Climate Change	<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> Science and Technology
<input type="checkbox"/> Conflict Resolution	<input type="checkbox"/> Human Rights	<input type="checkbox"/> Social Development
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<input type="checkbox"/> Criminal Justice	<input type="checkbox"/> Humanitarian Affairs	<input type="checkbox"/> Technical Cooperation
<input type="checkbox"/> Culture	<input type="checkbox"/> Indigenous Peoples	<input type="checkbox"/> Trade, Finance and
<input type="checkbox"/> Development	<input type="checkbox"/> International Law	<input type="checkbox"/> United Nations Associations
<input type="checkbox"/> Disabled Persons	<input type="checkbox"/> Labour	<input type="checkbox"/> Water
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<input type="checkbox"/> Drug Control	<input type="checkbox"/> Media and Communications	<input type="checkbox"/> Youth
<input type="checkbox"/> Education	<input type="checkbox"/> Migration	
<input type="checkbox"/> Energy	<input type="checkbox"/> Outer Space	