



Full member applicant assessment & approval procedure

The following process will be used to review and assess applications for Federation full membership.

- 1. Application and requested attachments are received.
- 2. Applicable state licensing reports are requested.
- 3. Application is announced to members.
- 4. Conference is scheduled at the applicant's location: to become familiar with the agency and its leadership; to discuss Federation purposes, goals and benefits of member participation; and to explore any areas where there may be questions about eligibility for membership.
- 5. Executive committee reviews application and supportive materials and makes recommendation to Federation Board.
- 6. Board votes on application.
- 7. Applicant is notified of Board vote.
- 8. If application is approved, membership commences upon receipt of initial dues payment.

TO BE COMPLETED BY APPLICANT

Complete, formal name of organization, including "Inc." if applicable:

Street

address: _____

City: _____ State _____ Zip _____

County: _____

Mailing address

(if different): Street / PO box: _____

City: _____ State _____ Zip _____

Phone: (_____) _____ Fax: (_____) _____

Agency web address: _____

Executive's name: _____

Executive's title: _____

Email: _____

Number of years in position: _____; with the agency: _____

Our agency serves the following counties:

with branch offices in the following cities:

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Please check below the types of programs and services this agency provides and indicate in the right-hand column those programs which are accredited by the national standards-setting body identified here:

- COA
- JCAHCO
- CARF
- Other: _____

Check all that apply: Check here if accredited:

- Adoption
- Adventure-based program
- Community-based services.
- Corrections program—adults

- Day care for children.
- Day treatment.
- Education.
- Emergency shelter.
- Employee assistance program.
- Employment program.

- Family services.
- Foster care.
- Refugee resettlement service.
- Residential treatment.
- Respite care.

- Senior services.
- Substance abuse services.
- Volunteer programs

If applicable, please identify the current Federation member(s) responsible for recruiting this organization for Federation membership:

Understanding that Federation membership, once approved by the Federation Board of Directors, commences upon receipt of a full member's initial dues payment based on an audit of the agency's most recently-completed fiscal year (copy enclosed), I calculate our annual dues as follows:

Total agency expenditures [to include unrestricted operating expenditures, restricted fund(s) expenditures, and depreciation expense; and to exclude capital asset acquisition expenditures] last-completed fiscal year: \$_____ (A)

Enter dues rate from Full member dues formula chart: _____ (B)

Multiply figure A by B: \$_____ (C)
 —Maximum: see dues formula chart
 —Minimum: \$250/year

Applicant's signature indicates applicant organization subscribes to the Federation's purposes as defined in the Federation's Articles of Incorporation, Bylaws and Board Policies:

Signed: _____

Date: _____

Please attach the following items when submitting your membership application:

- Agency organizational chart
- Most recent audited financial statement
- Most recent annual report of agency services and programs
- Current list of agency board members
- Most recent certificate of accreditation
- Typed list of branch office locations and phone #s
- Descriptive brochures about agency programs.

**Submit complete application and attachments to:
 Michigan Federation for Children and Families
 309 N. Washington Square, Suite 011
 Lansing MI 48933**

Questions? Call (517) 485-8552.