**Curacao Transnational Accreditation Council.** Hoogstraat 18-22 , Otrobanda, Curacao. Email: info@ctac.ac

Application for Allied Organization membership

(For all Quality assurance and accreditation support institutions and interest organizations that supports the vision and mission of CTAC.)

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**Application Completion Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Full legal name of the Institution:............................................................................**

**2. Physical Campus Address........................................................................................**

**3.General Phone No:.....................**

Chancellor/ Chairman of the Board Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ emails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secretary of the Board Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ emails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President's / CEO Cell phone\_\_\_\_\_\_\_\_\_ emails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Vice-President's phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ emails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ emails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Operation Office.

Full name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Attach proof of incorporation or charter of your organization

(For all Quality assurance and accreditation support institutions and interest organizations that supports the vision and mission of CTAC.)

6. attach a brochure that fully describe your organization , its activities and how it aligns with that of CTAC

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**7. Affirmation and Signature**

7.1.As a corporate / allied Organizational member, we have agreed to support the vision and mission of CTAC Curacao. This members does not imply accreditation, or recognition by CTAC.

7.2. We understand and agree that all payments we have made to CTAC Curacao are not refundable.

7.3. If approved for corporate / allied Organizational member status, our institution understand and agree that we must state clearly in our website and all advertising material that ‘**’our institution holds corporate / allied Organizational member status with the Curacao Transnational Accreditation Council located at Hoogstraat 18-22 , Otrobanda, Curacao. Email:** **info@ctac.ac****. corporate / allied Organizational member status is a pre-membership status granted to those institutions that meet the CTAC`s Conditions of Eligibility for members that support the vision and mission of CTAC Curacao. This membership does not imply accreditation, or recognition by CTAC..’’**

**7.4. We the members of\_\_\_\_\_\_\_( state your institution`s name here)\_\_\_\_\_\_will not write any misleading statements in our website and all publication that will in any way suggest that we are accredited by CTAC. Doing so will lead to instant loss of our** **corporate / allied Organizational member status without any refund.**7.5. No matter the outcome of the Application, we understand and agree that we cannot hold CTAC liable in any way or in any form, for the outcome of application exercise as shall be publish on CTAC website. In witness therefore, signed and submit this application witnessed by a notary public this\_\_\_\_\_\_\_\_\_ th day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_. Anno Domini.

7.6. Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Full name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Chancellor/Chairman of the Board

Name of the institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.7..\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

Full name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ President/ Vice-Chancellor

Name of the institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.7..Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_

Registrar and Secretary of the Board.

Name of the institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ your intuition’s Seal here
**Email the documents as single pdf file with a proof payment to info@ctact.ac**.

**8. Notary Public witness**

**9.Appendixes**