



COMMUNITY OF PRACTICE APPLICATION FORM

BECOME AN OFFICIAL MEMBER OF THE TAAP COMMUNITY
OF PRACTICE

If you or your organization is interested in becoming an official member of the TAAP Community of Practice, please complete and submit this form via email to taap@worldlearning.org.

1. Your Information:

Name: _____

Title: _____

Affiliation: Self-Employed NGO CSO/CBO Private Business Philanthropy/Foundation
 Government Agency Other

Affiliation Name: _____

Country: _____

2. Your contact details:

Email: _____

Phone: _____

Physical address: _____

3. Please share a short paragraph on why you and/or your organization seeks to be a member of the TAAP Community of Practice:

4. The face-to-face CoP meetings will most likely occur in Washington DC, but a virtual platform will also be available. I will be joining the meetings (check box):

- In person Virtually In person & virtually

5. I am interested in engaging in the following CoP activities (check all that apply):

- Promoting shared intentional learning
 Developing an inter-agency social inclusion theory of change
 Developing a menu of indicators for monitoring and evaluating social inclusion results
 Building a data and evidence base on what works for promoting social inclusion in projects
 Implementing (parts of or all) the TAAP Toolkit in my project

6. There are currently two task groups in the TAAP Community of Practice. Please indicate which group(s) you want to join:

- Promoting Shared Learning (Which works to create learning products)
 Strengthening the Evidence Base (Demonstrate the extent to which gender and social inclusion contribute towards achieving the SDGs)
 If you'd just like to join the larger Community of Practice.

7. We would like to explore your commitment to learning and sharing. Check One:

- Yes, I/My organization is able to commit to up to a 5% Level of Effort (LOE) and to actively participate in a learning and sharing agenda for advancing the social inclusion imperative.
 No, I/my organization is not able to commit to any LOE at this time.

8. We would like to share your organization's name and logo on the TAAP Inclusion Website and with the TAAP Community of Practice. Check One:

- Yes, I / My organization understands that we are becoming official members of the TAAP Community of Practice, and that our name and logo can be publicly shared, including with the media.
 No, I/my organization is not able to publicly share our membership in the TAAP Community of Practice at this time.

How we intend to use your information:

The personal identifiable information you provided above will be used to 1) contact you regarding the meetings within the CoP, 2) inform you about the progress of the CoP work through periodic reports.

Please check which emails you would like to receive:

- TAAP Tuesday newsletter
 TAAP Inclusion Listserv (intended to share information/resources among TAAP CoP members)
 ONLY emails related to the TAAP CoP's meetings and activities

You can change your mind at any time by clicking the unsubscribe link in the footer of any email you receive from us, or by contacting us at taap@worldlearning.org. By submitting this form you agree that World Learning may process your information in accordance with these terms.