




## Type of organization

Please select the option that best describes your organization.

 <p>Faith-based, nonprofit, or a school PTA/PTO</p>	 <p>Public school</p>
 <p>Private school</p>	 <p>Business or corporation, a college or university, a government agency, the US Military, or any other entity</p>

Faith-based, nonprofit, or a school PTA/PTO:

## Organization Verification

To begin the automatic verification process, please provide your organization's EIN.

Employer Identification Number

These federally assigned 9-digit numbers help verify your application. We use them to confirm your 501c3 status.

← Organization Type

Submit EIN →

Public School:

## Public School Verification

To begin the automatic verification process, please provide your public school's NCES ID.

If you don't know your school's NCES ID, you can search for it with the [NCES search tool at nces.ed.gov](https://nces.ed.gov/ipeds/datacenter/ipedssearch/).

### NCES Public School ID

These federally assigned 12-digit numbers help verify your application. You must provide a valid NCES ID to apply.

← Organization Type

Submit NCES ID →

Private School:

## Private School Verification

To begin the verification process, please provide your private school's NCES ID.

If you don't know your school's NCES ID, you can search for it with the [NCES search tool at nces.ed.gov](https://nces.ed.gov/ipeds/datacenter/ipedssearch/).

### NCES Private School ID

These federally assigned 8-character identifiers help verify your application. You must provide a valid NCES ID to apply.

← Organization Type

Submit NCES ID →

Business or company, or a college/university...:

# Certifying Organization Application

## Organization Information

Organization's Legal Name

Please choose the option that best describes your organization

- Affiliate/branch of a larger organization
- Organization Headquarters
- Independent organization without parent entity
- Other

Type of Organization

Federal Tax ID

These federally assigned numbers help verify your application content and expedite the review process. (This should *not* be a personally identifiable number such as your social security number.)

Website or Social Media Profile Link

The full web address, for example <http://www.site.org>

Mission Statement

Select one that best describes the volunteers you're most likely to recognize.

- Volunteers who've provided outstanding service for my organization
- Members of my organization (such as students, employees, congregants, etc.) that have volunteered with another organization
- Community members whose history of service and volunteerism have helped promote our organization's services and mission (you may be asked to provide proof)
- Other

**Organization's Mailing Address**

Full Name

Address Line 1

Address Line 2

City

State/Province/Region

ZIP/Postal Code

Country

**Leadership's Contact Information**

For example: President, CEO, Director

Full Name

Title

Email

Phone

**Your Contact Information**

Contact information same as above

Full Name

Title

Email

Phone

Yes, please send me other email communication from Points of Light, including volunteer and grant opportunities

**Submit Application**