



**CHILDREN'S  
ADVOCACY  
CENTERS**  
OF NORTH DAKOTA

## Application for New Membership

Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Web Address: \_\_\_\_\_

Counties in official service area: \_\_\_\_\_

Membership Level\*:  Accredited  Associate  Affiliate

Please submit the following with your application:

- A. Briefly explain your community's commitment to the long-term goal of developing a fully operational Children's Advocacy Center; include community support, development of the task force, multidisciplinary commitment, etc.
- B. Describe your multidisciplinary team make-up. Is there representation from law enforcement, child protection, prosecution, the medical field, victims' advocacy, and mental health services?
- C. Will victim advocacy, medical and mental health services be provided on-site or through linkages with other appropriate providers? If by other appropriate providers, what is (or will be) their relationship to the Children's Advocacy Center?
- D. Current annual CAC/MDT budget
- E. Organizational chart
- F. Board of Directors membership list
- G. Multidisciplinary Team member list
- H. Team protocols or, if protocols have not yet been developed, MOU for each team agency

Please email your application to [director@cacnd.org](mailto:director@cacnd.org).

\*See a list of definitions regarding the National Children's Alliance's membership levels here: <https://www.nationalchildrensalliance.org/ncamembership-types/>.

Children's Advocacy Centers of North Dakota

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