
WOMEN'S EMPOWERMENT PRINCIPLES

JOIN THE WEPs

– How to submit the application –

This step-by-step guide aims to help you with your WEPs application. Please follow the instructions for an easy and faster process.

Please note that all fields with an asterisk (*) are mandatory fields.

Chief Executive Officer

First Name*	Last Name*
<input type="text"/>	<input type="text"/>

Please insert the CEO's first and last name as indicated in the government-issued identification documents.

Gender*

Please choose the applicable option: Female, Male or Other

Email*

Please insert the CEO's professional email address. The email will not be visible to the public. The information is for the WEPs Secretariat knowledge only.

Title*

Please insert the CEO's full title without acronyms.

Signed CEO Statement of Support*

No file chosen

Please upload a PDF of the signed CEO Statement.
[Upload requirements](#)

Please upload the CEO Statement of Support. Please include the CEO's full name and signature, the full company name and date of signature. Please upload the document as .pdf.

CEO Quote*

Please provide a quote from your CEO highlighting the reason(s) s/he commits to implement the WEPs. Please note that the quote may be included in WEPs outreach materials – digital, print and social media.

[About text formats](#)

CEO Photo*

 No file chosen

[Upload requirements](#)

Please insert a powerful **quote** from your CEO highlighting the reason(s) s/he commits to implement the WEPs and upload a high resolution (max 8 MB) photo of the CEO. Please note that the quote may be included in WEPs outreach materials – digital, print and social media.

Primary Contact Information

The Primary WEPs Contact should be the person that could receive information, conference invitations and various opportunities on behalf of the CEO and the organization/company. Please note that the information in this section is for the WEPs Secretariat use only. **This information will not be displayed on the WEPs website.**

First Name*	Last Name*
<input type="text"/>	<input type="text"/>

Please insert the Primary Contact person's first and last name as indicated in the government issued identification documents.

Gender*

Please choose the applicable option: Female, Male or Other

Email*

Please insert the email of the Primary Contact.

Title*

Please insert the full title of the Primary Contact without acronyms.

Telephone*

Please insert the office number or work mobile number of the Primary Contact person.

Secondary Contact Information

The Secondary Contact could be anyone within the company working on gender issues.

The information in this section is for the WEPs Secretariat use only, this data will not be displayed on the website or company profile.

First Name*	Last Name*
<input type="text"/>	<input type="text"/>

Please insert the Secondary Contact person's first and last name as indicated in the government issued identification documents.

Gender*

- Select a value -

Please choose the applicable option: Female, Male or Other

Email*

Please insert the email of the Secondary Contact.

Title*

Please insert the full title of the Secondary Contact.

Telephone*

Please insert the office number or work mobile number of the Secondary Contact.

About the Company

About the Company section includes information that you could make available on the WEPs website. Once the application has been approved, the CEO and/or Primary and Secondary Contacts will receive the WEPs Welcome Kit and the opportunity to create the Company Profile Page (where this information will be displayed). You will be able to decide what information that gets displayed and what information will remain available only to the WEPs Secretariat at that point.

Name of the Company*

Please include the legal name of the company indicated in the Registration Certificate. Please avoid acronyms.

Ownership*

Privately held Publicly Listed State-owned Cooperative Industry Association Chamber of Commerce

Sector* Region*

- Select a value - - Select a value -

Number of Employees* Website*

- Select a value -

UNGC Member* Country*

- Select a value - - Select a value -

[+ Base Country](#)

For Ownership, Sector, and Number of Employees fields, please select the best available option. For Website, please indicate the corporate website address where we can find more information about the company's work on gender equality and women's empowerment. Please indicate if the company is a UN Global Compact Member (Yes/No). For the fields on Country and Region, please indicate the country and region where the CEO making the commitment is based.

Are you present in other countries?*

Yes No

[+ Are you present in other countries?](#)

Present in other countries: This is defined as countries where your company/organization has been legally established and where you plan to implement the WEPs. If you plan to implement WEPs in other countries under the CEO management, please select "Yes" and list the countries in the right-side field "Other countries".

Are you present in other countries?*

Yes No

[Are you present in other countries?](#)

Other Countries

Select values

[About other countries](#)

Company Gender Balance

The Company Gender Balance section requests information about the status of gender balance within the company. Once the application has been approved, the CEO and/or Primary and Secondary Contacts will receive the WEPs Welcome Kit and the opportunity to create the Company Profile Page (sharing this information about the company in this section of the WEPs website). You will be able to decide what information that gets displayed and what information will remain available only to the WEPs Secretariat at that point.

Percentage of Women Employees*

- Select a value -

Percentage of Women at Management Level*

- Select a value -

Percentage of Women on Boards/Executive Team/Partners:*

- Select a value -

Please indicate the most suited option for the Percentage of Women Employees, Percentage of Women on Boards, Executive Team/Partners, and the Percentage of Women at Management Level as per the company internal assessment and reports.

WEPs Sponsor/Referral

Sponsor/ Referral

- None -

Please choose the organization that recommended you become a WEPs Signatory, if any.


Support our WEPs activities

Financial Contribution*

Yes No

The WEPs Secretariat is looking to expand the work through guidance and training on WEPs implementation. Your financial support would help us achieve this objective. If you indicate “yes”, our Team will connect with the Primary and Secondary contacts by email. The companies that donate to the WEPs Secretariat receive a badge on their unique company profile page and will be listed on the main company listing page (if among the top 5 donors). The specific badges vary depending on the financial contribution. You can read more about donating to the [WEPs Secretariat here](#).

Submit your application

A rectangular button with rounded corners and a thin border, containing the text "Submit" in a simple, sans-serif font. The button is centered within a larger, empty rectangular frame.

Once you completed the form and uploaded the two attachments: (1) CEO Statement of Support, and (2) the high-resolution photo of the CEO, please submit the application.

Next steps

The WEPs Secretariat will review the application and if approved, you will receive an email confirming your successful application. Please allow us 10-15 business days to process the application.

Once the application has been approved, the CEO and/or Primary and Secondary Contacts will receive the WEPs Welcome Kit and the opportunity to create the Company Profile Page, sharing the information about the company. You will be able to decide what information that gets displayed and what information will remain available only to the WEPs Secretariat at that point.