Application for "At-Large Structure" (ALS) Designation

Applications should be submitted electronically to staff@atlarge.icann.org. Please address any questions about the applications process to this address.

The form can be downloaded from http://www.atlarge.icann.org/files/atlarge/als-application-form-en.doc

Organization Contact information

1. Organization's Name:

   Nova Scotia Community Access Program

2. Organization's email address: awvcscor@valleylibrary.ca

3. Organization's phone number (include country/city codes):

   (902) 665-2995 ext 230

4. Organization's address (location and postal address, if different):

   1660 Hollis Street, Ste 501
   PO Box 2311
   Halifax, NS
   B3J 3C8

5. Organization's website (URL) (if available):
   http://www.nscap.ca

Primary and Secondary Contact for Organization:

If accredited, the primary contact will be assumed to be that person who will cast any votes required, with the secondary person being the alternate – though your Organization may at any time change its voting and alternate representatives.

6. Primary contact:

   a. Name: Dana Perry

   b. Email address: awvcscor@valleylibrary.ca

   c. Telephone: (902) 665-2995 ext 230

7. Secondary Contact:

   Name: Eric Stackhouse

Email address: estackho@nsngp.library.ns.ca

    d. Telephone: (902) 755-6031

Description

1. Structure and Governance:

    a. Is your Organization constituted so that individual Internet users who are citizens or residents of countries within the Geographic Region in which your Organization is based control your Organization?

        Indicate Yes or No: Yes

    b. Please explain the answer above in sufficient detail so that a person not familiar with your Organization would be able to understand the reasons for your answer, and attach or reference the URLs where any statutes or operating principles or other supporting information related to this question can be found:

        NSC@P is a not-for-profit organization that holds regular public meetings. The public is encouraged to attend and take part. If not included in the agenda they may only sit and listen. However if the public would like to speak at the meetings they need to contact the Regional Coordinator in advance and request to be added to the meeting agenda in order to address their concerns. Attached to this application is the NSC@P Terms of Reference.

    c. Is your organization formally incorporated or organized under a national legal jurisdiction?
        Indicate Yes or No: No

        IF YES: Please describe what legal recognition it has and indicate the place of legal incorporation or registration

        Although "NO" was indicated, NSC@P is in a transitional restructuring and will be formally organized under provincial legal jurisdiction.

    d. Describe your Organization's structure (e.g. governing and decision-making bodies and processes):

        See Attached NSC@P Terms of Reference

    e. Does your organization have written bylaws or other constitutional instruments?

        Indicate Yes or No: Yes

        IF YES: Please provide a copy along with your application (in English if available)

        See Attached NSC@P Terms of Reference

f. Explain the eligibility requirements (if any) for your Organization's constituents/membership (if you provide a written application for admission as a member, you may attach a copy):

    N/A

g. In what language/s does your Organization conduct its business?
    English/French

2. About Your Members

    a. Do you have individual members with the ability to vote in or otherwise control the management of the organization?

        Indicate Yes or No: Yes

        IF NO: Describe what role individuals have in the management and work of the organization.

    b. Do you have organizations as all or part of your membership?

        Indicate Yes or No: No

        IF YES: Describe whether they are profit-making, non-profit-making, a mixture of both, and/or what proportion of the total membership each type of private sector organization is. Please also describe what the nature of the organizational members is: For example, are they all of a similar type or interested in a similar activity or policy area?

    c. Do you have governmental bodies, or quasi-governmental bodies, as members of your organization?

        Indicate Yes or No: No

        IF YES: Please describe their nature and role in the decision-making and work of your organization, and the proportion of the total membership made up of these types of organization.

    d. Describe the general membership – are they predominately of one (or more) professional background or interest group? (e.g. journalists, online rights activists, consumer organizations, individual consumers, etc.):

        NSC@P's general membership/Board of Directors is made up of volunteers from the community. They come from all walks of life culturally, professionally and otherwise.

    e. Describe how your Organization keeps its constituents/membership informed about, and enables them to participate in, decisions regarding issues of interest:

NSC@P engages with its users/clientele through newsletters, social media, webpage and traditional forms of advertising and op-eds.

    f. Approximately how many members, of each type of membership class if you have more than one, do you have?
N/A

3. Provide support for the statement that your Organization is self-supporting (by answering "yes" you confirm that it will not rely on ICANN for funding): Indicate Yes or No: Yes

4. What is the primary source, or sources, of funding for your Organization? (if unfunded/entirely voluntary simply indicate "N/A"):

Currently the primary source of funding for the Nova Scotia Community Access Program comes from the Nova Scotia Department of Economic and Rural Development and Tourism and in-kind volunteer support.

5. Do you receive any funding from government agencies or for-profit entities? If so, please describe below and describe their involvement in the activities of the organization (if they so participate):

The Nova Scotia Community Access Program is funded through the Province of Nova Scotia. Additionally, through partnerships with other organizations (government and non-governmental) the Nova Scotia Community Access Program delivers programming and support to the community.

6. Does your Organization commit to supporting its individual constituents'/membership's informed participation in ICANN?

Indicate Yes or No: Yes

6. Does your Organization post on the Internet publicly-accessible, current information about your Organization's goals, structure, description of constituent group(s)/membership, working mechanisms, leadership, and contact(s) (if this information currently is available, provide URLs)?

Indicate Yes or No: Yes

http://www.nscap.ca/

https://www.facebook.com/novascotiacap

https://twitter.com/novascotiacap

http://novascotiacap.tumblr.com/

7. Provide information on your Organization's leadership (leaders' names, positions, emails):

Eric Stackhouse (NSC@P Provincial Chairperson)
estackho@nsngp.library.ns.ca

Karen Parusel (NSC@P Provincial Coordinator)
PARUSEKI@gov.ns.ca

Nancy Flam (Corporate Strategist)
FLAMN@gov.ns.ca

Objectives

1. Please describe your Organization's mission and purpose (please attach any mission or policy statement for your Organization, if in writing, or provide a URL, if posted):

   The Nova Scotia Community Access Program (NSC@P) connects people to technology, training and opportunities that open doors locally, nationally and worldwide for growth and development.

2. What ICANN-related issues currently are of interest to your Organization's constituents/membership:

   The Nova Scotia Community Access Program (NSC@P) advances communities' economic, social and cultural priorities through technology and innovation, building a strong, sharing, cooperative, competitive province.
   As it pertains to ICAAN, NSC@P supports the principles of safe and equal governance and policy regarding the internet for all.

3. If your Organization is accredited, will it commit to participating actively in the Regional At-Large Organization (RALO) for the region in which your Organization is based?
   Indicate Yes or No: Yes

4. If your Organization is accredited, does it or will it agree to adhere to the provisions of the Memorandum of Understanding (MoU) between the other ALS's in your Geographic Region and ICANN, as if it were an original signer of that document?

   Indicate Yes or No: Yes

   The texts of the MoUs can be found at:
   https://community.icann.org/display/atlarge/Reference+Texts

Signature

Include the name, and title, if applicable, of the individual who is authorized by your Organization to sign this application and commit your Organization to comply with ALS criteria.

Signature: _____

Name: Dana Perry

Date: October 31, 2012

Title: Regional Coordinator