

Application for Membership and Certificate of Participation in the 100 Percent Club

Commentary

Attorney General James Uthmeier is asking all Florida businesses and organizations to join him in the fight to end human trafficking by raising awareness through workforce training. This application process is designed to identify and recognize those businesses and organizations that have implemented policies aimed at reducing human trafficking and agree to take steps to promote public awareness of human trafficking.

Any business or organization may submit an application for membership and for a certificate of participation. There is no processing fee for the application. The Florida Office of the Attorney General reserves the right to deny participation or recognition.

Instructions for Form

- **Applicant Information:** Provide the full legal name of the applicant and its office address. The contact point is the individual to whom any correspondence may be addressed regarding the application or documentation provided.
- **Execution:** The application must be signed by a person who is authorized to sign on behalf of the applicant.
- **Delivery Instructions:** The completed form may be emailed to CitizenServices@myfloridalegal.com. A certificate of participation will be issued on filing a completed and approved application.
- **Training:** The required human trafficking training is available through the Florida Alliance to End Human Trafficking. The training can be accessed at youcanstopht.com/training.html.
- **Quick-Reference Resources:** Downloadable and printable information is available at youcanstopht.com/how-you-can-help.html. The alert cards and posters should be placed in employee vehicles and common areas.



Application for Certificate of Participation



Submit to:
Office of the Attorney General
CitizenServices@myfloridalegal.com

The below applicant seeks to participate in the Florida Office of the Attorney General's 100 Percent Club established in January 2022. The 100 Percent Club recognizes businesses and organizations for taking proactive steps to train employees on the signs of human trafficking and for providing quick-reference resources to effectively report suspected human trafficking. The voluntary steps and measures taken by the applicant to prevent and combat human trafficking, as demonstrated by the information provided, qualify the applicant for membership and for a certificate of participation.

Applicant Information

1. Applicant Name: _____
Provide the full legal name of the business/organization

2. Address: _____
Street City State Zip Code

3. Contact Person: _____
First Name Last Name Job Title

Work Phone: _____ Email address: _____

Business/Organization Information

Type of Business/Organization: Retail Service Manufacturing Other

Average Number of Employees: _____ Number of Locations in Florida: _____

Markets Served by Applicant: Local National International

Briefly Describe Applicant's Main Products/Services:

Eligibility

4. Has applicant adopted a policy aimed at training employees to spot the signs of human trafficking?

Yes No

5. Will applicant provide quick-reference resources for employees to know how to report suspected human trafficking?

Yes No

6. Describe below any best practices that applicant has already implemented to train employees on spotting the signs of, and reporting, suspected human trafficking.

Agreements for Participation

As a participant in the 100 Percent Club, applicant agrees to the following activities in order to receive the certificate of participation. Please check each box to certify the applicant's agreement.

- Applicant agrees to use youcanstopht.com/training.html to train their employees on the signs of human trafficking.

- Applicant agrees to provide employees with quick-reference resources created by the Florida Office of the Attorney General found at youcanstopht.com/how-you-can-help.html and agrees to not alter the materials without the approval of the Florida Office of the Attorney General.

- Applicant agrees to not use the Florida Office of the Attorney General seal, or the name, image or likeness of the Florida Attorney General other than quick-reference resources provided at youcanstopht.com/how-you-can-help.html.

- Applicant agrees that membership is not complete or recognized until applicant receives the certificate from the Florida Office of the Attorney General.

Certification of Applicant

I certify that I have reviewed the preceding statements. To the best of my knowledge, the information provided is true, accurate, and complete. I also certify that I have the authority to execute this application on behalf of the applicant.

Execution

Date: _____

Signature of Authorized Person

Printed or typed name and capacity/title