2018 Stanford ACT Nonprofit Business Management Consultation

Community Foundation for Monterey County

Application Tips and Instructions

Nonprofit Business Management Consultations with Stanford ACT are intended to help an organization make progress in addressing special, non-recurring business and management situations within the organization. Nonprofit organizations working in all fields are invited to apply for these consultation services.

Consultations may be used for a broad range of capacity-building activities including, but not limited to:

- Board development and governance
- Business model analysis
- Business plans for specific projects
- Financial evaluation, planning and reporting
- Marketing and branding
- Organizational business model development
- Organizational development
- Strategic planning

Application Tips

1. Be clear and concise in your responses.

2. If you need to leave this form and return later, scroll to the bottom of the page and click "Save Application" before logging out.

3. Watch character count limits on the narrative response questions. The character counter is below each narrative box and the total count **INCLUDES SPACES**.

4. The character counts are maximum limits. You are not required to use all the space.

5. Have someone review your document to ensure clarity. If they have questions, so will our reviewers.

6. You may download a printer-friendly PDF of your application by clicking the "Application Packet" link at the top of this page.

For technical inquiries, please contact Karina Gutierrez at grants@cfmco.org or 831.754.5880.

For all other inquiries including fiscally sponsored groups, please contact Kaki Rusmore at kaki@cfmco.org or 831.375.9712 x124.

Organization Information

Organization's Mission Statement*

What is the primary purpose of the organization? Is this embodied in a written mission statement (if so, please include).

Character Limit: 1000

Year Organization was founded*

Character Limit: 4

Organization History*

Provide a brief history of the organization. *Character Limit: 2000*

Board of Directors*

List all board members, noting officers. Character Limit: 2000

Board Committees*

List all board committees. *Character Limit: 1000*

Organization's Staffing and Finances*

Describe the organization's staffing (FTE staff) and finances (last 12 months' revenue/expenses). *Character Limit: 3000*

Profit & Loss or Statement of Activities

Upload a profit and loss statement for the most recently completed year, listing income and expenses.

File Size Limit: 3 MB

Organization's Annual Budget* Character Limit: 20

Organization's Primary Funding Source*

Character Limit: 100

Application

Project Name*

Provide a brief one-line phrase to describe this request. This phrase serves as the title of your request in our records. Examples include "analysis of financial management system" or "development of business plan for key programs".

Character Limit: 100

What are the pressing issues the organization faces?*

Character Limit: 4000

What assistance do you seek from Stanford ACT?*

And how would you define a successful outcome of the Stanford ACT engagement?

Character Limit: 4000

Which area of consulting most closely describes the services you are requesting?*

Choices

Business plans for projects/programs Governance/Board development Financial analysis and planning Marketing and branding Organizational development Strategic planning Other

If other, explain briefly.

Character Limit: 1500

If Stanford ACT is unable to assist you at this time, how will you address these issues?*

Character Limit: 2000

What other information should Stanford ACT consider in evaluating your

request?

Character Limit: 2000

Organization Agreement

We, the undersigned, certify that the practices of this organization conform to the nondiscrimination policy as follows. This organization does not discriminate in its employment practices, volunteer opportunities or delivery of programs on the basis of race, religion, gender, national origin, age, disability, veteran status, marital status, sexual orientation, or any other characteristics protected by law.

We, the undersigned, hereby state that the information presented in this application is complete and factual. By typing our names below and submitting this application, we confirm our authority and have notified and secured approval from all parties. We hereby agree that

funds, if granted, will be used only for the purpose described above unless written approval from the Community Foundation for Monterey County is received.

We, the undersigned, confirm that we are committed to supporting and engaging with the Stanford ACT consulting process, and are ready to consider recommendations and implement those with which they concur.

Name of Authorized Board Member*

Character Limit: 100

Name of Executive Director or Other Authorized Representative*

(Second person, different than above) *Character Limit: 100*

Title* Character Limit: 100

Use this space for any optional comments or explanations regarding this Stanford ACT application.

Character Limit: 2000