## **Community Partner Application:**

# **Section 1: Organization Information Organization Name Executive Director/CEO Mailing Address** City **Zip Code** State Website Year Established **Annual Operating Budget Number of Full-Time Staff Number of Part-Time Staff Current Board Size Primary Contact Person Title** Phone

**Email** 

#### **Section 2: Mission Alignment**

- 1. Organization Mission Statement
- 2. Please describe how your organization's mission aligns with Greater Longview United Way's focus areas (check all that apply and explain):

**Youth Opportunity** 

**Community Resiliency** 

**Healthy Community** 

**Financial Security** 

- 3. What are your organization's primary programs or services?
- 4. What geographic area do you serve, and approximately how many people do you reach annually?

## **Section 3: Partnership Interest &Value Proposition**

- 5. Why do you want to partner with Greater Longview United Way?
- 6. What specific contributions can your organization offer to support United Way's mission? (Please be specific about capacity and frequency)

Volunteers: How many volunteers and for what types of activities?

Outreach Support: What networks can you reach and how many people?

Fundraising Support: What fundraising activities could you support?

Other Contributions: Please explain.

7. What benefits are you most interested in receiving as a Community Partner?

**Networking opportunities with other partners** 

Social media recognition and promotion

Collaborative programming opportunities

**Inclusion in advocacy efforts** 

**Modified United Way logo usage** 

Other:

## Section 4: Partnership Experience & Capacity

8. Have you previously received funding from Greater Longview United Way? If yes, when and for what purpose?

- 9. Describe any current collaborations or partnerships you have with other nonprofits or community organizations:
- 10. What is your organization's experience with:

#### **Data Collection and Reporting**

Extensive, Moderate, Limited, or None

**Comments** 

#### **Volunteer Coordination**

Extensive, Moderate, Limited, or None

**Comments** 

#### **Community Outreach**

Extensive, Moderate, Limited, or None

**Comments** 

### **Section 5: Commitment & Expectations**

#### 11. Our Community Partners commit to:

Submit annual impact reports on contributions to shared goals Attend semi-annual partner meetings Maintain high standards of financial and programmatic integrity

#### Do you agree to these expectations?

12. Is there anything else you would like us to know about your organization or interest in partnership?

Please submit the following with your completed application:

- · Current organizational chart
- Board of Directors list
- Most recent annual report or program summary
- IRS determination letter (501c3 status)

#### Name

#### **Title**

#### **Signature**

Applications will be reviewed within 30 days of receipt. Selected applicants will be contacted for a brief interview with the Executive Director before final partnership decisions are made.