



C³ Application

Application Checklist

Information provided to C³ staff, Steering Committee, and consultants is confidential. Limited public information on program participation and results may be made available if accepted into C³.

Date:

Lead Applicant Organization Name:

Additional Applicants:

Application packet should contain:

- 2010 C³ Application – **Agency Information Form** (for each organization applying)
- 2010 C³ Application – **Collaboration Summary Narrative** (jointly completed by all)

For each organization:

- Official notice of tax exempt status organization (501 (c)(3) letter or other documentation)
- Form 990
- Secretary of State registration letter
- Organization budget
- Organizational chart
- Bylaws
- Written confirmation indicating support for the application that is signed by Executive Director or officer and the Board Chair

Application Submission

Completed application packets should be submitted by 2/26/10 5:00 p.m.

Application must be submitted in hard copy and electronically. Submit a completed copy of application via email to Karen Oliver at koliver@uway.org. Submit four unbound paper applications (one original and three copies) to:

Collaboration for Community Change
Attn: Karen Oliver
United Way of the Midlands
1800 Main Street
Columbia, SC 29201

Application Questions

Karen Oliver
(803) 733-5416
koliver@uway.org



C³ Application

Agency Information Form: Lead Organization	
Agency Name:	
Contact Name and Title:	
Mailing Address:	
Phone:	
Email:	
Website:	
EIN Number:	
Organization Summary – Complete based on individual organization. Limit to space provided.	
1. Brief description of the organization and mission.	
2. Brief description of programs and services offered.	



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<p>(Additional space for Question #2)</p>	
<p>3. Describe special populations served or a unique service niche offered.</p>	

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<p>4. Number of staff, including full- and part-time.</p>	
<p>5. Total Organizational Budget for last year</p>	<p>\$ Year:</p>
<p>6. Organization Budget for this year (if known)</p>	<p>\$ Year:</p>
<p>7. Total number of unduplicated clients or customers served last year. *Note * n/a for arts or cultural groups, but explain in #8 what and how you track services.</p>	
<p>8. Regarding the number of clients in Question 7, please explain how you define client or customer (e.g. individual, family) and how you track the number served.</p>	



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<p>9. What are current challenges for the organization or missed opportunities?</p>	
<p>10. What strengths does the organization bring to the proposed collaboration?</p>	



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11. Why is your organization seeking collaboration?



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Agency Information Form: Partner Organization	
Agency Name:	
Contact Name and Title:	
Mailing Address:	
Phone:	
Email:	
Website:	
EIN Number:	
Organization Summary – Complete based on individual organization. Limit to space provided.	
1. Brief description of the organization and mission.	
2. Brief description of programs and services offered.	



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<p>(Additional space for Question #2)</p>	
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<p>4. Number of staff, including full- and part-time.</p>	
<p>5. Total Organizational Budget for last year</p>	<p>\$ Year:</p>
<p>6. Organizational Budget for this year (if known)</p>	<p>\$ Year:</p>
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<p>9. What are current challenges for the organization or missed opportunities?</p>	
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11. Why is your organization seeking collaboration?

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Agency Information Form: Partner Organization Use for a third partner (if applicable). If more than three partners are applying contact C ³ staff.	
Agency Name:	
Contact Name and Title:	
Mailing Address:	
Phone:	
Email:	
Website:	
EIN Number:	
Organization Summary – Complete based on individual organization. Limit to space provided.	
1. Brief description of the organization and mission.	
2. Brief description of programs and services offered.	



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<p>8. Regarding the number of clients in Question 7, please explain how you define client or customer (e.g. individual, family) and how you track the number served.</p>	



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Collaboration Summary Narrative

*The Narrative is to be completed jointly by all project partners. Please answer each question in order and limit **Collaboration Summary Narrative** to maximum five pages, 12 point font, single-spaced. Label responses according to question number.*

1. *What current opportunity or challenge do you seek to address with a new collaboration or strategic restructuring?*

Some possible challenges or opportunities include:

- Sustainability: concerns about maintaining client services, programs or events.
- Staffing: increased or undesired staff turnover, resignation of a key leader, staff who are ready to take on additional challenges, changes in board leadership.
- Organizational Structure: outgrowing the current policies and processes, a new growth opportunity that matches the strengths of the organization, changes to policies that affect program operations or client services.
- Resource Allocations: new challenges for population currently being served (lack of employment or underemployment, increased need for healthcare or childcare), inefficient methods to track and measure success for those served, new priorities or requirements from funders or policy leaders.

2. *Brief description of proposed project. How will the project overcome the challenges described above?*

Some possible examples are:

- Assuming back office operations (such as reception, accounting, human resources, information technology).
- Sharing program staff.
- Acquiring another organization or program from another organization.
- Merger of two or more organizations.

3. *Regarding Question 2, what are the expected outcomes for the proposed project? What new capacity will be created upon the completion of the project?*

- (a) How will you measure the progress and success of the proposed project?
- (b) What will be different after the project when C³ is completed?
- (c) Will the organizations have more capacity? In what way?
- (d) Do you anticipate cost savings? What are they?

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Some possible outcomes are:

- Reduced costs: improvements in efficiency in organizational operations or program effectiveness.
- Increased revenue: through either new or diversified funding sources or in-kind resources such as increased volunteerism or donated items or services.
- Increased programmatic gains: more people get same services or same number of people get additional services.

4. *How will the proposed project impact the community or clients served?*

- (a) What will change for your clients when the project is finished? Will clients receive expanded services or be served for longer periods of time? Will clients be served in a quicker, more efficient manner?
- (b) Will there be increased awareness of your organization and/or programs?
- (c) Will there be increased community engagement or level of volunteerism?

5. *What efforts have been undertaken by you or your partners address the opportunity or challenge addressed in Question 1?*

- (a) Has your organization undertaken strategic plans or feasibility studies to address the challenges?
- (b) For the proposed collaboration of this application, have you established written agreements with project partners, such as a Memorandum of Understanding? If so, attach.
- (c) Have you documented collaboration discussion with each Executive Director and the Board?
- (d) Has the Board formally approved discussions via a recorded vote in meeting minutes?



**Collaboration for
Community Change**
Helping Non-Profits Work More Effectively

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Collaboration Summary Narrative

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