

PARTNERSHIP IN PHILANTHROPY

205 Main Street
Chatham, NJ 07928
(973) 701-9810 www.pipnj.org

APPLICATION FORM for New Applicants

APPLICATIONS MUST BE SENT THROUGH THE MAIL to the address shown on this form.

PLEASE PRINT OR TYPE ALL APPLICATION INFORMATION

Organization Name _____

Address _____

Street

Suite/Box No.

City

State

Zip Code

County

Telephone _____ Fax _____

E-mail _____ Website _____

Contact Person: Name _____

Title _____

Name of the Executive Director (if not the person above): _____

INFORMATION ABOUT THE ORGANIZATION

1. Date of incorporation _____

2. Attach a copy of your IRS determination letter.

3. N.J. Charities Registration Number _____

4. Please state your organization's mission and population serviced:

5. What is your geographic service area:

6. Executive Director _____
Name Full time Part time Volunteer

Development Director _____
Name Full time Part time Volunteer

(Over)

Total number served by your organization annually: _____

Number served:

	<u>AGE</u>	<u>Male</u>	<u>Female</u>	<u>Black/ African American</u>	<u>Hispanic/ Latino</u>	<u>Asian</u>	<u>White</u>
5 years and younger	_____	_____	_____	_____	_____	_____	_____
6 to 12 years	_____	_____	_____	_____	_____	_____	_____
13 to 21	_____	_____	_____	_____	_____	_____	_____
21 to 65	_____	_____	_____	_____	_____	_____	_____
65 and over	_____	_____	_____	_____	_____	_____	_____

Age of youngest child served _____

Age of oldest child served (21 or younger) _____

INFORMATION ABOUT FINANCES

Please attach a copy of your last fiscal year financial statement and your most recent monthly financial statement.

7. Last complete fiscal year (From ___/___/___ to ___/___/___):

Current fiscal year budget: \$ _____

8. Has your organization run an operating deficit in the last five years? Yes _____ No _____

If so, when and how much: _____

Does your organization have a deficit reduction plan? Explain.

9. Please attach a copy of your most recent:

- Total expenses in the last completed fiscal year
- Total earned revenues in the last completed fiscal year
- Total contributed revenues in last completed fiscal year
- Monthly statement of activities (income and expenses)
- Year-to-date statement of activities
- Balance sheet
- Financial audit
- Please list your top 10 funding sources and amounts for the last completed fiscal year (e.g., annual appeal to individuals, corporate gifts, foundation grants, government agencies, etc.)

INFORMATION CONCERNING THE BOARD

10. Please attach a list of the names of Board members with their professional affiliations.

11. What percentage of Board members makes a personal gift each year? _____%

12. How does your organization hope to benefit from participation in the PIP Program?

An application processing fee of \$50 is required and should be sent with your application. This fee helps to cover our cost of managing the application and selection process. A check for the fee should accompany your application and be made payable to Partnership in Philanthropy.

For 16 years, PIP has provided quality, comprehensive consulting to selected New Jersey nonprofit organizations to increase their capacity and improve their services to the communities they serve. Given the current market value of hiring a fundraising expert, a PIP consultancy, which is comprised of 165 hours of consulting services, represents a minimum cost on the open market of \$20,000.

PLEASE READ AND SIGN BELOW

We have read the general criteria for participants and believe that our organization meets or exceeds them. Further, we understand the time, training and meeting commitments and are willing to devote the extra hours necessary to complete assignments.

We understand that the organizations selected to become PIP participants will be asked to commit significant board and staff time – 150 hours in year one with quarterly follow up of 15 hours in year two. We also understand that, if we are selected, our organization will be asked to pay a fee for the consulting service as follows:

For organizations with operating budgets:

Up to \$250,000	\$1,500 fee
From \$250,001 to 500,000	2,500 fee
From \$500,001 to 1,000,000	5,500 fee
Above \$1,000,000	7,500 fee

The fees may be paid in four increments with the first payment due at the time the consultancy begins and subsequent payments due midway and at the conclusion.

(Applicant's Signature)

Date

(Applicant's Title)

(Chairperson of the Board's signature)

Date

Please send your completed application and fee to:

Partnership in Philanthropy
205 Main Street
Chatham, NJ 07928