

**Greensboro Jewish Federation
2018 AGENCY ALLOCATION QUESTIONNAIRE**

Agency Name: _____
Contact Person/Title: _____ Date: _____
Address: _____ Telephone: _____
Email: _____
Total Operating Budget: _____ Tax Exempt Organization 501c(3): Y/N? _____

Amount Requested: _____

Instructions: To be considered for funding by the Greensboro Jewish Federation for this year, all agencies must return **one copy of each, via email**, by **Thursday, March 15, 2018**

- Completed questionnaire, please limit to 4 pages
- List of current Board of Directors
- Actual balance sheet and P&L for trailing 12 months
- Most recent budget
- IRS letter indicating tax exempt status
- Last year-end audit for agencies requesting \$10,000 or more
- Detailed statement of its history, purposes and activities

Deadline: Thursday, March 15, 2018

Email to: Michele Perrell, Director of Finance and HR at mperrell@shalomgreensboro.org and copy Marilyn Chandler, Executive Director: mchandler@shalomgreensboro.org.

Note: Questionnaire is available on the web site: www.shalomgreensboro.org If you have any questions, please call Marilyn Chandler, 336-852-5433 x 236 or email: mchandler@shalomgreensboro.org.

1. Agency mission statement? If you do not have one, please describe the purpose of your agency in one paragraph.

2. Give a brief summary of your agency's notable successes

3. If you received an allocation last year, how was it spent?

4. Specifically how will your agency be using the funds from the Federation? If possible, please identify the approximate number of Jews and Jewish families in North Carolina served by your organization. If you have made a request in the past, what is the difference between this current request and your earlier requests(s)?

5. Please state anticipated program changes (enhancements of existing programs, addition of new ones, elimination of program components) for your agency/institution over the next 3 to 5 years, and why.

6. Briefly describe how you evaluate whether your agency is meeting its objectives (e.g. surveys, community feedback, service statistics, other methods).

7. Do you work collaboratively with other agencies (please identify them), and on which programs or projects?

8. Please briefly describe the agency's Board or other governing bodies, addressing:

a. How frequently does it meet and what are its primary functions?

b. Is there an Executive Committee? How frequently does it meet and what are its primary functions?

c. Are 100% of the Board members donors to your organization?

d. Do Board members participate in fundraising for the organization?

9. Does your agency conduct supplementary fundraising in the Greensboro area? If so, describe your fundraising activities. How much was raised in Greensboro during the last fiscal year and from how many individuals? Do you anticipate any new fundraising this coming year? (Please specify.)

10. Other Funding Sources:

Funding Source

Total Request

Amount Committed

11. What percent of your revenue is from Federations?

12. *[for local agencies only]* Do 100% of your board members contribute to your local Jewish Federation?

13. What percent of your annual revenue is received from endowment revenue?

14. Please explain budget variances of greater than 25%

15. *[for national agencies only]* Do you consider the allocation made by the Greensboro Jewish Federation to your organization to be annual dues?

16. *[for national/regional agencies only]* If other agencies/organizations provide similar services/programs nationally or regionally, how are you unique?(please be specific)

17. *[for national/regional agencies only]* Are there members of the Greensboro Jewish Community who sit on your board? If so, please list:

Signature of chief staff person and officer of the requesting agency Board indicating approval of request submitted and of all written Federation Allocation Guidelines attached.

print name/title

signature

print name/title

signature