



## Nonprofit Learning Series Application Information

Organization Name and Address

County Location of Headquarters

Mission of the Organization

Name of CEO/Executive Director

Email Address and Phone Number

How long have you been in your current position?

Do you plan to leave your position in the next two years?

### FINANCIAL INFORMATION

- Operating Revenue for FY2018 and FY2017
- Did your organization incur a deficit in the last two fiscal years?
- Were you able to close the gap?
- If you were able to close the gap - how did you do that?

### ORGANIZATIONAL INFORMATION

- Is it a possibility that your organization will need to close in the next six months?
- If there is a possibility your organization will need to close, why?
- What is the organization's biggest challenge or opportunity?
- When is the last time that your organization completed a strategic or business planning process?

### PARTICIPANT INFORMATION

- What would you hope to gain from participating in this series?
- Will you be able to attend all five sessions?
- Will you be able to attend on these dates?
- Will you agree to submit an action plan that will lead to one improvement in your organization within nine months of completing this series?

### SUPPORTING DOCUMENTS NEEDED

- Most Recent 990 Document
- Second Most Recent 990 Document
- IRS Determination Letter