Since the application must be completed in one sitting – it cannot be saved – we have provided this downloadable, printable sample of the questions so you can be thinking about your answers prior to beginning the process. When you are ready to start the application process, [click here](https://docs.google.com/forms/d/e/1FAIpQLScU7LRrnORoy9_R_tVIw-QWBffafsbJapCeboJKct4pnMgdJw/viewform?gxids=7628).

1. Your Nonprofit’s name, the name of the person filling out this application, and that person’s position.
2. Through which channel(s) did you hear about this opportunity and/or IKF?
3. Is your nonprofit headquartered in AND does it serve Wake, Orange and/or Durham counties? ***Please stop here if you answered no to #3 as those are the counties IKF serves. Thank you for your time and interest in IKF!***
4. Name of Executive Director
5. Primary Contact Person for IKF
6. # of years current ED has served
7. Mission Statement
8. Vision Statement
9. Website address
10. 501c3? Yes or No
11. Faith-based? Yes or No
12. Political affiliation? Yes or No
13. Do you have an active Board of Directors?
14. Nuts & Bolts
15. Date incorporated/created
16. Staff size
17. What is your annual budget?
18. Do you have an annual report? Yes or No
19. Number of Volunteers
20. Do you feel like you are known in the community? Why or why not?
21. What kind of fundraising do you do and what are approximate net proceeds?

15. Do you follow a strategic plan or roadmap? Yes or No

16. Define “under-resourced” as it pertains to your organization (operational, financial or marketing infrastructure).

17. Describe *what* makes your organization sustainable, i.e., describe the operational, financial, or marketing infrastructure that is already in place.

18. Briefly list a few successes.

19. Briefly describe your Board (how many, dig in or sit back, diverse careers, etc.).

20. IKF requires a minimum of 30 minutes each week with our primary contact, either by phone or in person. Will our contact be able to dedicate this amount of time each week? Yes or No

21. Is your organization able to absorb IKF’s help (accessible, react to our requests, etc.)? Yes or No

22. Bullet the top 5 goals for the next 12-18 months.

23. Would there be an opportunity for IKF to work with your client population in some way?

24. If chosen, how would you use IKF’s deliverables to execute on your Strategic Plan and Vision Statement? Describe how our time together will affect your long-term work in the community.

25. Is there additional information pertaining to the above questions you would like us to know?