



United Way of Bemidji Area
PO Box 27
Bemidji, MN 56619
Phone: 218.444.8929
Fax: 218.444.8928
Email: bjuw@paulbunyan.net
www.unitedwaybemidji.org

Dear Applicant,

Agencies seeking partner funding from the United Way of Bemidji Area **MUST MEET THE "BASIC CONDITIONS OF FUNDING"** (see attached sheet.). Additionally, agencies must forward to the United Way office **17 separate packets**, each containing copies of the following information and completed forms:

**Please do not place each application packet in a separate envelope or 3 ring punch folder. You may staple or paperclip each packet together. Also, copying on the front and back side of one sheet is permitted.*

1 packet marked "OFFICE COPIES" including:

- ◆ 1 completed **SUMMARY INFORMATION** form (see attached)
- ◆ 1 completed **AGENCY BUDGET** form and requested schedules (see attached)
- ◆ 1 signed **CONTRACT FOR PARTNERSHIP** (attached)
- ◆ 1 agency brochure (if applicable)
- ◆ Most recent available copy of Registration under the Minnesota State Charitable Contributions Act
If exempt from registration, submit a reason for exemption.
- ◆ Copy of 501(c)(3) – *unless* already on file in the United Way office (please contact the United Way if you are unsure if it is on file), or if there were changes in your status since last year
- ◆ Copy of By-laws – *unless* already on file at the United Way office (please contact the United Way if you are unsure if it is on file), or if changes were made since last year
- ◆ **2** copies of most recently completed Audit report
If an Audit is not required, submit your financial statement as approved by your Board of Directors complete with statements, schedules and notes.
- ◆ **2** copies of most recently completed IRS Form 990
(Not required by organizations that do not employ paid staff or professional fundraisers AND do not receive more than \$25,000 in total contributions from the public during an accounting year)

16 individual packets (for Allocation Committee members) including only:

- ◆ 1 completed **SUMMARY INFORMATION** form each (see attached)
- ◆ 1 completed **AGENCY BUDGET** form and requested schedules each (see attached)
- ◆ 1 signed **CONTRACT FOR PARTNERSHIP** (attached)
- ◆ 1 agency brochure (if applicable)

FAILURE TO INCLUDE ANY OF THIS INFORMATION COULD RESULT IN REJECTION OF YOUR APPLICATION. A completed application is not a guarantee of funding. If you have any questions contact Ashli Bowen, Executive Director at 444-8929.

APPLICATION DEADLINE - MARCH 31, 2008

BASIC CONDITIONS FOR FUNDING

Agencies seeking new or continued funding through the United Way must comply with or agree to the following conditions:

1. **BE INCORPORATED, NOT-FOR-PROFIT AND IRS TAX EXEMPT**
Agencies receiving United Way dollars must be not-for-profit organizations that have been declared tax exempt by the Internal Revenue Service and have a 501(c)(3) status. In addition, each agency must annually submit a properly signed "Affidavit of Compliance" with the charitable regulations of the State of Minnesota.
2. **PROVIDE COMMUNITY SERVICE BASED ON DOCUMENTED NEED(S)**
The agency/program request should be based upon an identifiable current need, demand, or problem in the community within the United Way target and service areas. Services which are supported by United Way dollars should be clearly defined and their impact documented by the organization applying for or receiving funds. Services should be targeted toward an identifiable population and/or geographic location within the service area of United Way of Bemidji Area.
3. **BE NON-DISCRIMINATORY**
Discrimination by race, creed, color, sex, age, handicapping condition or religion is prohibited. Each organization receiving United Way funding must have an up-to-date non-discrimination policy.
4. **HAVE ACTIVE, ROTATING VOLUNTEER LEADERSHIP THAT REPRESENTS DIVERSE ELEMENTS OF THE BEMIDJI AREA**
The agency's Board of Directors or governing body should consist of volunteers who participate in the policy making processes, represent the diverse elements of the community, periodically rotate off the Board on a planned basis, and meet at least quarterly.
5. **HAVE A SOUND FINANCIAL AND PROGRAM MANAGEMENT**
It is critical for United Way support that there is demonstrated ability to manage the programs and services in accordance with generally accepted accounting procedures, e.g. American Institute of Certified Public Accountants (AICPA) Guide. The organization must provide copies of its annual audit using an independent certified public accountant or accounting firm.
6. **HAVE A LOCAL CHAPTER/PROGRAM IN THE BEMIDJI SCHOOL DISTRICT COVERAGE AREA AND/OR SERVE PEOPLE WITHIN THIS DESIGNATED COVERAGE AREA**
Any agency applying for United Way funds that has a national or state charter must have a local chapter/program and have a visible presence in the Bemidji area in order to be eligible for United Way funding. The agency must also show ongoing support, participation and service to this area throughout the funding cycle.
7. **UNITED WAY FUNDING MAY NOT BE USED FOR BRICK AND MORTER/CAPITAL BUILDING PROJECTS**
Agencies applying for funding may not use United Way dollars for remodeling or renovation, expansion or new construction of office or program site.

6. Total # unduplicated individuals who were: _____
 Actually served by your whole program: _____
 Actually served in BEMIDJI AREA ONLY: _____
 Potential additional clients in Bemidji area*: _____

2 years ago _____
 the past/last year _____

Projection next year _____
**Estimates or actual known additional clients in need of your services that could have been served if you had enough people, money, space, etc.*

What was your cost per client within the past year? \$ _____

7. If your organization serves other geographical areas outside the Bemidji area, please list below ALL areas covered by your organization (i.e. cities and/or counties, etc.) and **ALSO** complete two budget forms, one for the whole program and one "local budget" for the Bemidji area

8. Total #	Volunteers:	Volunteer Hours:	Staff:	Full Time Equivalent:
	Whole / Bemidji Prog. / Area	Whole / Bemidji Prog. / Area	Whole / Bemidji Prog. / Area	Whole / Bemidji Prog. / Area
3 years ago	____ / ____	____ / ____	____ / ____	____ / ____
2 years ago	____ / ____	____ / ____	____ / ____	____ / ____
Last year	____ / ____	____ / ____	____ / ____	____ / ____

9. By whom, and how are your agency programs/services assessed for effectiveness. (If assessment was performed by an outside agency please attach a copy.)

Based on this evaluation, what significant changes, results and/or outcomes occurred last year for the clients served by your organization? (ex. changed attitudes, behavior, learned skills or knowledge, gained employment etc.)

10. What new/different programs are you planning for 2008/2009? How will these be funded?

11. What supplementary fund-raisers does your agency conduct?

Activity	Net Results	Geographic Area Covered	Time Frame Conducted
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

12. How are your services the same/different from agencies that provide similar services? Do you coordinate/refer with each other?

13. What are your alternative sources of funding if United Way is unable to fund your request?

14. Will you be using United Way of Bemidji Area as a match for other funding?
Yes___ No___ If yes, please describe.

15. How many board meetings do you have per year? _____

Do you have a quorum at your meetings? Yes___ No___

If not, why_____

*Also, please list or attach a current roster of your Board of Directors

16. **SUCCESS STORY** - Describe how this program/service has made a difference in someone's life or the community. Share a specific example(s) from the past 12 months. This story(ies) should demonstrate how donations to United Way were used in your organization to make a difference. (If your story relates to a specific individual(s) or family, please share if they would agree to participate in sharing their story with the community and media.) For confidentiality, please do not share specific names of clients or program participants.



CONTRACT FOR PARTNERSHIP

- Each fund-raising event by member agencies requires prior approval by the United Way of Bemidji Area Board of Directors.
 1. Fund-raising events by member agencies will not be approved by the Board of Directors from September 1 through November 1.
 2. Door to door, business to business, telephone and direct mail cash solicitation by member agencies will not be allowed. The Board may waive this rule under demonstrated extreme extenuating circumstances. This shall not be construed to limit bona fide membership development activities.
- Monies allocated to the organization from the United Way of Bemidji Area are to be used for the intended purpose as stated in the original Allocation Application. Any changes in circumstance must be reported to the United Way for approval. If not approved, allocation repayment will be requested from the organization to the United Way of Bemidji Area.
- An "Exit Report," at the end of the allocation cycle, is requested of the organization if the organization decides to terminate their relationship as a continuing United Way Partner Agency. The organization does NOT need to provide an "Exit Report" if the organization intends to reapply for the allocation process the following year.

By signing this contract, the below named agency's Board of Directors and staff agrees to follow these rules as set forth by the United Way of Bemidji Area. Any fundraising or actions not in compliance with this contract may result in the withdrawal of the agency's allocation by the United Way of Bemidji Area. A signature also certifies that all information contained in the application has been reviewed and is true and correct.

Date: _____

Agency: _____

Agency Director/President (Print) _____

Signature: _____