



**COMMUNITY SERVICES FUND OF NEBRASKA
Application for Membership in 2017 Campaign**

Application Due:

Please send one copy of **ALL** documents electronically to admin@communityservicesfund.org **AND** mail one paper copy of **ALL** documents to Community Services Fund of NE, 3800 VerMaas Place, Suite 200, Lincoln, NE 68502.

I. Basic Organizational Information

A. Name, Address, Telephone and Website Address of Organization

Organization Name

Street Address

City, State, Zip

Telephone

Website Address

B. Name by which organization is to be listed in the 2016 campaign brochure:

C. 25-word organizational description for inclusion in the 2016 campaign brochure:

D. Executive Director

Name

Phone

Email

E. Board Chair

Name	Phone	Email
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F. Person preparing this application

Name	Position
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II. Organization Mission and Programs

Please provide a copy of the organization's mission statement and a brief description of the organization's programs.

III. Supporting Documentation

- A. Proof of 501(c)(3) status
- B. Articles of incorporation (The organization must have been incorporated for a minimum of three years with an established record of community service.)
- C. Bylaws
- D. Board Information:
 - List of current board members and their professional affiliations
 - Board giving policy (if applicable)
 - How often the board meets
- E. Financial information:
 - Organizations with annual operating budgets of \$500,000 or more must submit an independent audit for the most recently completed fiscal year. Members are required to submit audits annually.
 - Organizations with annual operating budgets under \$500,000 may submit an independent financial review of the most recently completed fiscal year, the current operating budget and the separately attached financial infrastructure checklist in lieu of an independent audit. Members are required to submit this information annually.
- F. Copy of 990 for most recently completed fiscal year
- G. Board adopted diversity or affirmative action statement (contact CSF for examples if needed)
- H. List of current staff members with position titles

IV. Optional Information

Please provide any additional information or statistics that will prove helpful to our understanding of the organization's mission, programs and/or operations. (i.e. brochures, most recent newsletter, campaign or marketing materials)

V. TWO Signatures

Executive Director

Board Chair or Officer