

# Fundraising Action Plan

LOCATION: ONLINE

# 2021 application

If you are interested in applying for the Fundraising Action Plan cohort, please fill out the form below. Be sure to include attachments described on the last page and email them Carly Williams, Special Projects Coordinator, at [cwilliams@forakergroup.org](mailto:cwilliams@forakergroup.org). **The deadline for application is 5pm, August 13.** We will let you know by August 20 if you are accepted as part of the cohort.

ORGANIZATION: \_\_\_\_\_

ORGANIZATION ADDRESS: \_\_\_\_\_

Up to 3 people from your organization may attend the Funding Action Plan cohort. The Executive Director is required, as is a board member for at least for at least the first class (see schedule). In addition, a third person, who most likely is either a fund development staff person or an additional board member, may attend some or all sessions. The fee covers all attendees.

NAME of EXECUTIVE DIRECTOR (*required*): \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

WORK EMAIL: \_\_\_\_\_

Preferred pronoun? \_\_\_\_\_

What special accommodations, if any, do you need to fully participate? \_\_\_\_\_

How many years have you worked in the nonprofit sector? \_\_\_\_\_

How many years have you worked in your current position? \_\_\_\_\_

NAME OF BOARD MEMBER (*required for at least the first session, see schedule*):

\_\_\_\_\_

WORK PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

WORK EMAIL: \_\_\_\_\_

Preferred pronoun? \_\_\_\_\_

What special accommodations, if any, do you need to fully participate? \_\_\_\_\_

NAME OF THIRD TEAM MEMBER (*optional*): \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

WORK EMAIL: \_\_\_\_\_

Preferred pronoun? \_\_\_\_\_

What special accommodations, if any, do you need to fully participate? \_\_\_\_\_

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### YOUR ORGANIZATION

Where is your organization in the following development phases?

- Start-up, *e.g. newly formed, establishing programs*
- Stable, *e.g. maintaining programs, operations, financially solvent*
- Transitioning, *e.g. re-organizing, merging, expanding*
- Ending, *e.g. struggling to survive or mission accomplished*

What year was your organization founded? .....

What is your approximate annual operating budget? .....

Do you have a donor database or a tool to organize your donor information? If so, what do you use?

What's your definition of a major donor (*size of gift or other criteria*)? (OK if you don't know)

What is the largest charitable gift (*not public/government grant*) your organization has received in the last 5 years?

What are your top two fund development goals for the coming year?

What is motivating you to join this cohort?

### FORAKER EXPERIENCE

Have you participated in other Foraker trainings or services? If yes, please describe:

I would like to be considered for the following scholarship assistance:

- Tuition discount
- Internet reimbursement

Scholarship funds are limited. Please let us know why you hope to be considered.

### HOW TO APPLY

Please include the following materials in your application packet:

1. A copy of your annual budget for the current fiscal year.
2. Any materials that you think we would find helpful (*e.g. a previous fund development plan, a strategic plan, gift chart, communications plan*)

Every effort is made to keep costs to a minimum. The fee is \$1,550 or \$1,350 for Foraker Partners.

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Course	Date	Location	Board Member Required
<b><i>Overview: Culture of Philanthropy and Understanding Your Donor Data</i></b>	Wed, Sept. 29, 10am-12pm	Zoom online	Yes
<b><i>Building Better Relationships by Reporting Back to Your Donors</i></b>	Wed, Oct. 13, 10am-12pm	Zoom online	Optional
<b><i>Crafting the Right Ask for Right Now</i></b>	Wed, Oct. 27, 10am-12pm	Zoom online	Optional
<b><i>Recognizing Your Donors and Planning Your Next Moves</i></b>	Wed, Nov. 10, 10am-12pm	Zoom online	Optional