

2018-2019 COMMUNITY PROJECT PROPOSAL

DEADLINE Friday, August 17, 2018 – 5:00 p.m.

Leadership Broward Foundation, Inc.

1421 SE 4th Ave., Ste. D., Fort Lauderdale, FL 33316 Tel (954) 767-8866 Fax (954) 485-6683 www.leadershipbroward.org

Over the past 36 years, Leadership Broward has assisted numerous community organizations in Broward County. Recent community projects were completed in conjunction with the following organizations:

Junior League of Greater Fort Lauderdale, Lighthouse of Broward, Minority Development & Empowerment, 2-1-1 Broward, Rebuilding Together; Riverwalk Trust, Sun Trolley, Stranahan House, Ann Storck Center, Broward Children's Center, SOS Children's Villages, United Way of Broward County, Women in Distress, Gilda's Club, Sun-Sentinel Children's Fund and KidSafe Foundation ..

to name just a few of the more than 500 projects completed to date.

Leadership Broward Foundation, Inc.

2018-2019 COMMUNITY PROJECT TIMELINE

DEADLINE FOR PROPOSAL

Friday, August 17, 2018 - 5:00 p.m.

Leadership Broward Foundation, Inc.
1421 SE 4th Ave., Ste. D., Fort Lauderdale, FL 33316
or via e-mail to
andrew@leadershipbroward.org

COMMUNITY PROJECT APPLICATION INTERVIEWS

Week of August 27, 2018

NOTIFICATION OF ACCEPTANCE TO ATTEND PLACEMENT FAIR

Week of September 3, 2018

COMMUNITY PROJECTS PLACEMENT FAIR (IF PROPOSAL IS SELECTED)

Thursday, September 20, 2018

5:00 p.m. – 8:00 p.m.

COMMUNITY PROJECTS KICK-OFF (IF SELECTED FROM THE PLACEMENT FAIR)

Thursday, September 26, 2018

5:00 p.m. - 7:00 p.m. Location Provided Upon Selection

PROGRAM YEAR (PROJECT TEAM AND AGENCY COLLABORATE TO IMPLEMENT PROPOSAL)

October 2018 to May 2019

PROJECT CONCLUSION (WRITTEN REPORT AND PRESENTATION BY PROJECT TEAM)

Friday, June 7, 2019

8:30 a.m. to 12:30 p.m. – Project Presentations
Location TBD
7:30 p.m. - Announcement of Winning Community Project Team /
Recipient of the "Solutions for Communities" Award Announced
Location TBD

Dates and times subject to change due to unforeseen circumstances.

<u>Please keep this information for your records.</u>

Leadership Broward Foundation, Inc. 2018- 2019 COMMUNITY PROJECT ORGANIZATION INFORMATION

Agency/Non-Profit Name		
Address:		
City:	Zip:	
Phone:	Fax:	
Website:		
some degree of decision	rmation: tative of the agency who should be knowledgeable about the proje -making ability, and committed to providing support for it. The liais nunity Project, providing valuable information about both the agency an	on is a
Name:(Last)		
(Last)	(11131)	
Title:		
	r communication takes place electronically.)	
Signature:	Date:	
-	ormation: approval and commitment of the CEO/ED who will be able to fully pa and participating in the process of implementation.	rticipato
Name:	Title:	
(Last) Address:	(First)	
City:	Zip:	
Phone:	E-Mail Address:	
Signature:	Date:	

Leadership Broward Foundation, Inc. 2018- 2019 COMMUNITY PROJECT PROPOSAL

Please submit a 2-page, 12-point minimum font, proposal utilizing the following headings:

1. Name of Project

2. Agency

The agency is the beneficiary of the project. Please give the mission of the agency and describe the population that will be served by the project.

3. Project Description

This is an outline of what the Community Project will do for the agency during the eight-month project period. Group members will use the project description as a guide in forming their project plans. Proposed projects should be unique to the Broward community and be aimed at providing a charitable product or service to the community. It is our goal for the Community Projects to become long-term sustainable programs, products or initiatives, reflecting the quality of leaders and quality of not-for-profit organizations in Broward County. In our experience, the combination of ideas and labor between our participating agencies and class members have led to outstanding Community Projects that evolved beyond what the original idea contemplated. In order to facilitate the creation of the project's idea into its final form, we believe that our Class Members should have the ability to deviate from the outline, while keeping with spirit and particular goals of the project. As part of your project description, please include both 1) your ideas for how this project could transformed from how you see it now, and 2) your willingness to give our Class Member the ability to be flexible and make modifications to your original project as outlined.

4. Needs Assessment

Why is the project needed? How will the project have a positive and long-term impact in the community?

5. Specific Objectives and Goals

The specific objectives should provide measurable targets for the Community Projects. The groups will be evaluated on whether they have formulated specific objectives and have met their stated goals. The liaisons are very important to the development and achievement of the Community Project objectives.

6. Resources Available and Sustainability

Please detail anything that the agency and/or the liaisons make available to the Community Project such as clerical support, technical expertise, office supplies, etc. during the project. **How will the agency sustain the program/project after the project is done?**

7. Resources Needed

Please explain what the Community Project group members will have to assemble in order to fulfill the goals of the project. Also, please describe in <u>detail the funding and/or resources your organization will provide to complete the project. Please submit a project budget, if applicable, demonstrating how the funding for this project is expected to be solicited. (See attached project budget template). If no project budget is submitted, and in our discretion determine funding will be necessary for your project, we will require you to supplement your application with a project budget.</u>

8. Special Skills Needed

Please specify any talents and expertise that would be useful in order for group members to complete the project; these can be available from within the Community Project group members or recruited from the community.

9. Agency Associations

Please list any government agencies with which your organization is associated and/or any agencies that the project group members will need to be associated with in order to complete this project.

10. Additional Information

Please briefly describe any additional information that might be helpful to better explain the project.

Please be sure to include a copy of your IRS 501(c)(3) determination letter and the agency's most recent audited financial statement or filed IRS Form 990.



2018-19 Community Project Proposal

CERTIFICATE OF NON-DISCRIMINATION

(Organization)

Acting in my official capacity on behalf of the above applicant organization, I hereby certify that the above organization does not discriminate on the basis of age, race, religion, sex, national origin, sexual orientation, disability or any legally protected classification in access to services, employment, membership, or in the selection of volunteers or vendors.

I certify that the applicant organization does not discriminate in any of the above categories even if the organization is eligible for a ministerial exception or any other exceptions under federal, state or local anti-discrimination statues, ordinances, regulations or interpretive case law.

Signature:	 	
Printed Name:	 	
Title:		
Date:		
Phone:		