



**United Way of the Ozarks, Inc.**

**Community Investment**

**2012 Request for Proposal**

Proposal Deadline: 5:00 pm, April 1, 2011

Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

I affirm that I have reviewed this form, and to the best of my knowledge, the information furnished is correct and provides full and fair disclosure of the organization.

\_\_\_\_\_  
Chief Professional Officer

\_\_\_\_\_  
Chief Volunteer Officer

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Required Documentation

**Everything submitted must be 3 hold punched. Do not staple or bind. Use only paper clips or binder clips.**

Please provide four (4) copies of the following organizational information:

- \_\_\_\_\_ A copy of your most recent IRS Form 990 (*this may be printed duplex*)
- \_\_\_\_\_ A copy of your most recent audit (*this may be printed duplex*)
- \_\_\_\_\_ Federal tax exempt letter or letter stating affiliation with government or school group
- \_\_\_\_\_ Agency annual budget
- \_\_\_\_\_ Agency balance sheet
- \_\_\_\_\_ Year to date statement of financial activity (revenue and expenses)
- \_\_\_\_\_ Reserve policy with explanation
- \_\_\_\_\_ Agency's most recent annual report

Please provide twenty (23) copies of the RFP with all sections completed. This will be from both the Word and Excel forms and should include:

- \_\_\_\_\_ Cover (Signed by Board Chair and Agency Executive)
- \_\_\_\_\_ Organization Overview
- \_\_\_\_\_ Program Proposal & Budget-one for each program request
- \_\_\_\_\_ Logic model-one for each program request
- \_\_\_\_\_ Geographical Service Summary
- \_\_\_\_\_ Patriot Act
- \_\_\_\_\_ Board Roster with contact information, officers, terms of service and meeting dates

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Organization Overview

Agency Name: \_\_\_\_\_

Your Agency's United Way focus area:

\_\_\_\_\_ Access to Healthcare

\_\_\_\_\_ Safe Neighborhoods

\_\_\_\_\_ Basic Needs/Self Sufficiency

\_\_\_\_\_ Successful Youth

\_\_\_\_\_ Children At-Risk

\_\_\_\_\_ Direct Volunteer Services

\_\_\_\_\_ Healthy Families

1. What is the Agency's Mission?
2. Please provide a brief history of the Agency.
3. What is the Agency's service area?
4. Total amount awarded from United Way of the Ozarks in 2011: \_\_\_\_\_
5. Total amount requested from United Way of the Ozarks in 2012: \_\_\_\_\_
6. What is the Agency's fiscal year?

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**2012 Request for Proposal Continued**

7. Did the Agency offer any new programs or services in 2011? Is the Agency planning to offer any new programs or services in 2012? If yes, please explain these changes and how the programs will be funded. Did the Agency reduce programs or services in 2011 or are you planning to reduce programs or services in 2012?
  
8. Does the Agency currently have any pending legal actions that would affect your reputation or ability to pursue your mission? If yes, please explain.
  
9. Is the Agency planning a capital campaign in the next year?
  
10. What are your fund raising plans for the coming year, including fund raisers scheduled?
  
11. Does the Agency have a strategic plan? When was it approved by the Board of Directors?
  
12. Does the Board of Directors evaluate the Executive Director's/CEO's performance on a regular basis?

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Program Proposal

*This form must be filled out for each program requesting United Way funding.*

Agency Name: \_\_\_\_\_

Program Name: \_\_\_\_\_

Program #: \_\_\_\_\_ (This corresponds to the program # on the budget and the geographic service summary).

Program Director: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

1. Critical community issue(s) addressed by this program:
2. 2011 United Way funding for this program: \_\_\_\_\_
3. 2012 United Way requested funding for this program: \_\_\_\_\_
4. Unduplicated number of people served by this program in 2010: \_\_\_\_\_
5. Unduplicated number of people to be served by this program in 2011: \_\_\_\_\_
6. What population does the program serve?
7. What is the purpose of the program?
8. Do you collaborate or work cooperatively with other providers on this program?

9. What are the service delivery methods of the program?
  
10. State your intended outcomes for this program. (Be certain you are tying them to the logic model.)
  
11. Describe the program's outcome achievement over the past 12 months.
  
12. Do you utilize evaluation criteria in an effort to continuously improve services?
  
13. Describe other aspects of the program's success.
  
14. Describe obstacles to the success of the agency or program; include any factors that have impacted the program.

## Logic Model

Complete One for Each Program

Program: \_\_\_\_\_

**Inputs:**

**Activities:**

**Outputs:**

**Outcomes:**

**Initial:**

**Intermediate:**

**Longer Term:**

## Logic Model Instructions

**Inputs:** What do you invest? What resources and contributions go into the program?

Examples: staff, time, money, facilities, expertise

**Activities:** What do you do with the inputs in order to fulfill your mission?

What services, events, and products reach people who participate or are targeted?

Examples: feed and shelter the homeless, counsel, mentor youth or advocacy efforts.

**Outputs:** Who do you reach or who participates? What is the direct product of your program activities?

Examples: number of men, women, veterans served, number of classes taught.

**Outcomes:** What are the results or benefits for individuals, groups, communities, organizations or systems during and after the program outputs?

Initial or Short Term:

Examples: pre/post test results, program attendance, client surveys

Intermediate:

Examples: program completion rates, employment rates, percent staying in their home for a certain amount of time.

Longer-Term or Ultimate Impact:

Examples: return rate of clients, percent staying in home for long period of time, Improved conditions, modified behavior, change in values or attitudes

Make certain that you expound upon outcome numbers in your narrative. The logic model is meant to demonstrate how you work toward your goals. Outcome numbers should demonstrate if you reached your goals or how close you came to reaching your goals. Outcomes must be measurable.