



NPO Laboratory Application Form

Group Name: \_\_\_\_\_

Are you already an approved 501(C)3? \_\_\_\_\_ If so, date of approval: \_\_\_\_\_

Primary group contact : \_\_\_\_\_ Position with group: \_\_\_\_\_

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

Secondary group contact: \_\_\_\_\_ Position with group: \_\_\_\_\_

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

Address for group: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

On a separate page, please respond to the following, attaching additional pages as necessary.

- 1) Tell us about your nonprofit idea. How did you come up with it? Why is it important? What problem will it solve?
- 2) What have you done already to get your NPO idea going? What has worked? What hasn't worked?
- 3) What is your desired outcome(s) if you are part of the NPO Lab? How will you measure success? (no more than 500 words)
- 4) Tell us about your qualifications to grow this program. Conversely, what additional education, training or support do you think you will need to make this program a success?
- 5) How will your program improve the lives of residents of Monroe County?

Name of applicant: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_