

**Greater Cleveland Faith Based Collaborative (GCFBC)
Cohort II Application Form**

*Please email completed application form to jsmall@janusmallassociates.com
no later than 5:00 PM on February 5, 2018*

1. Name of House of Worship: _____
Address: _____
Phone: _____
Faith Tradition: _____

2. Name and Title of Spiritual Leader: _____
E-mail: _____

3. Name and Title of proposed Satellite Coordinator: _____
E-mail: _____

4. In a few sentences, where is your House of Worship located and what is the geographic region served by the House of Worship?

5. In which of the following areas does the House of Worship offer community programming? Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Arts and Culture | <input type="checkbox"/> Job Placement |
| <input type="checkbox"/> After School Reading Program and Tutoring | <input type="checkbox"/> Job Readiness |
| <input type="checkbox"/> Bible Study | <input type="checkbox"/> Physical Activity/Nutrition |
| <input type="checkbox"/> Community Development | <input type="checkbox"/> Prayer Meetings |
| <input type="checkbox"/> Computer Literacy | <input type="checkbox"/> Senior Programming |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Substance Abuse Prevention |
| <input type="checkbox"/> Digital Media Training | <input type="checkbox"/> Summer Day Camp for Youth |
| <input type="checkbox"/> Health and Healthcare Ministry | <input type="checkbox"/> Other: _____ (please be specific) |
| <input type="checkbox"/> Hot Meals/Food Pantry | |

6. In three or four paragraphs, provide a narrative description of your community programming and your community involvement (beyond sacerdotal duties). Please include information on your current partners, both faith-based and/or community-based – who they are and what the partnership entails.

7. Does the House of Worship have a separate 501 c 3?

- Yes
- No

8. If yes, what is the 510 c 3's mission statement?

9. When did the entity receive its 501 c 3 status?

10. What is the annual budget for community programming whether there is a separate 501 c 3 or it is part of your regular House of Worship budget? Please answer in narrative format, briefly discussing sources of income and how the dollars are used.

11. Please provide a brief bio for the spiritual leader and for the potential satellite coordinator.

12. How do you feel you and the House of Worship will benefit by participating in this Cohort II program? Please be brief yet specific.

I have read the conditions in the "Cohort II Houses of Worship will..." section C of the invitation to apply form and agree to all the conditions listed.

Signature of Spiritual Leader

Date