Mission Sustainability Initiative Grant Application: October 2023

Forefront

Partnering Organizations

The Mission Sustainability Initiative (MSI) at Forefront is dedicated to helping nonprofits thrive by providing the resources for leaders to regularly and thoughtfully explore collaboration and partnership strategies. Three types of grants are available:

Pre-exploratory: Our pre-exploratory grants provide funding for an organization to assess its readiness to engage in a strategic partnership, or for multiple organizations to either assess their preliminary compatibility or define their goals before exploring a formal partnership. The maximum amount available for a pre-exploratory grant is $5,000.

Exploratory: Our exploratory grants are to provide financial support to two or more organizations as they engage in good faith negotiations regarding a strategic partnership. These grants are often used for consultants to assist with negotiations or for outside financial or facilities experts to assist with due diligence. Exploratory grants range from $5,000 to $75,000.

Implementation: Our implementation grants are to help cover one-time costs of implementing partnerships that have been consummated or finalized. Implementation grants range from $5,000 to $75,000.

For inquiries related to MSI or the application below, please email [MSI@MyForefront.org.](MSI@MyForefront.org)

Type of Mission Sustainability Initiative grant for which you are applying*
Choices
Pre-Exploratory
Exploratory
Implementation

Project Name*
Please provide a project name that briefly describes the nature of your partnership work. Examples:

- Family Center Inc / Youth Services Inc Merger
- Bright Futures Partnership Assessment
- Food Pantry Co-Location Implementation

Character Limit: 250

Organization and Contact Information

Please provide the following information about each partnering organization. Any columns that are not relevant to your application may be left blank.

Pre-exploratory projects: Only one organization is required.

Exploratory projects: At least two partnering organizations should be listed here. The order in which partners are listed is not important, but the organization listed as Partner #1 should be the organization that will receive any grant funds awarded.

Implementation projects: If the partnership resulted in a newly merged organization, please list the resulting organization as Partner #1. If the partnership resulted in a joint venture or other newly formed organization, please list that organization as Partner #1 and the member organizations as Partners #2, #3, etc.

If you have any questions about how to complete this section, please don't hesitate to ask! Contact us at msi@myforefront.org.

Partners	Applying Organization / Partner #1	Partner #2	Partner #3	Partner #4
Organization Name				
Primary Address				
CEO / Executive Director Name				
Primary Contact Person for this Application				
Primary Contact Person's Title				

Primary Contact Person's Email Address				
Current Fiscal Year Projected Revenue				
Current Fiscal Year Projected Expenses				
Mission Statement				
Full-Time Staff				
Part-Time Staff				

Additional Partners

If your project includes more than four partners, please provide information about those organizations here.

If the mission statement of any partnering organization is longer than 250 characters and will not fit in the space above, you may include it here.

Character Limit: 2500

Service Area*

MSI Grants are available to organizations that serve the following Illinois counties. Please select all of the counties below that one or more of the partnering organizations serve.

Choices
Cook
DuPage
Kane
Kendall
Lake

Additional Organization Information*

Sharing demographic and other information about your organization helps Forefront to more fully understand the reach and impact of the Mission Sustainability Initiative. We ask each partnering organization to provide as much information as they feel comfortable sharing in the

following survey: https://www.surveymonkey.com/r/3TKXXKQ

The information collected in this survey will not be factored into MSI funding decisions but will help us to evaluate our overall outreach and grantmaking strategy.

Please affirm that each organization has submitted this survey.

Choices
All partnering organizations have responded to the MSI Impact Survey

Strategic Partnership Experience*
Do any of the organizations involved in this project have prior experience with a strategic partnership (whether or not it came to fruition)? If yes, please describe that experience.

Please enter "N/A" if none of the involved organizations have prior experience with strategic partnerships.

Character Limit: 1500

Proposed Strategic Partnership - Pre-Exploratory

Partnership Description*
Please describe the strategic partnership you are exploring. At the pre-exploratory phase, this information is likely still in flux, so please provide as much detail as is currently available or relevant to your exploration. In describing the partnership, please address the following questions:

- *What format will the proposed partnership take? (i.e. co-location, merger, shared staff, etc.)*
- *What prompted your organization to consider a strategic partnership at this time?*
- *How will or might the organizations' missions further align after the proposed strategic partnership takes effect?*
- *How much progress, if any, has your organization already made with the proposed strategic partnership?*
- *What essential questions must be answered or obstacles must be overcome before your organization can can make the decision to move forward with a formal collaboration?*

Please Note: Specific details about the scope and cost of the partnership exploration project will be requested later in the application.

Character Limit: 2500

Proposed Strategic Partnership - Exploratory

Proposed Strategic Partnership Description*

Please describe the strategic partnership for which you are seeking funding. In describing the partnership, please be sure to address the following specific questions:

- What format will the proposed partnership take? (i.e. co-location, merger, shared staff, etc.)
- What prompted the partners to consider a strategic partnership at this time?
- How much progress, if any, have the partners already made with the proposed strategic partnership?
- What essential questions must be answered or obstacles must be overcome before the partners can make the decision to implement a formal collaboration?

Please Note: Specific details about the scope and cost of the partnership exploration/implementation project will be requested later in the application.

Character Limit: 2500

Mission Alignment*

How do the missions of the partnering organizations align? How will the proposed partnership preserve or expand upon the existing missions?

Character Limit: 2000

Previous Experience*

Have the Applicant and Potential Partner(s) worked together before? If yes, please briefly describe that experience

While past collaboration is not required, we have found that organizations with a history of collaboration, even on short-term projects, are more likely to develop sustainable long-term partnerships.

Character Limit: 1500

Strategic Partnership - Implementation

Partnership Details*

Please describe the structure and purpose/mission of this partnership. Include information about the plans for leadership positions, administrative staff, program staff, facilities, and organizational name/branding, as applicable.

If these details are available in a Memorandum of Understanding or other partnership agreement, you may attach that document as an answer to this question.

Character Limit: 2000 | File Size Limit: 2 MB

Previous Partnership Experience*

What prompted the partners to consider a strategic partnership at this time? Have the partners worked together before? If yes, please briefly describe that experience.

Character Limit: 1500

Implementation Plan*

Please describe the scope of the strategic partnership implementation plan. Provide as much information as you can about the steps you will take and your planned timeline, including any progress that has already been made.

Character Limit: 2000

Project Lead

Project Lead*

Please provide the name, title, and affiliation of the person(s) identified to oversee the development of the proposed partnership. If the person is not the CEO or Executive Director of one of the partnering organizations, please note how was this person selected?

Character Limit: 1500

Goals/Impact

The MSI's primary goal is to help partnering organizations accomplish their goals - both the long-term impact goals and the short-term tactical goals associated with developing partnerships.

You're encouraged to provide your goals in concise bullet-point lists rather than full paragraphs.

Partnership Goals*

Please describe your overarching goals for this strategic partnership. In other words, why are the partners coming together, and what do you hope will be different if partnership comes to fruition? What is the expected impact of the partnership on the clients and communities served by the partnering organizations? How will the Applicant and Proposed Partner(s) evaluate the success of the strategic partnership?

Partnership goals may evolve during development, particularly in the pre-exploratory and exploratory phases, but please provide as much information about your goals as is applicable to the current phase of your partnership.

Character Limit: 1500

Project Goals*

Thinking of your current phase of partnership development (pre-exploratory, exploratory, or implementation) as a project, what are your goals for this work? What do you hope to learn or accomplish during this project, or what do you hope will be different once this project is complete?

If you are in the pre-exploratory or exploratory phase and learning is one of your primary goals, what are you hoping or learn, or what question(s) are you hoping to explore?

Character Limit: 1500

Project Budget

Project Budget*

Please provide a project budget detailing the one-time expenses associated with this phase of your partnership development. You may upload your own budget document or list the expense items in the table below (you don't need to do both).

You may include all of your project costs in the budget, but please note that MSI funds may not be used for ongoing programmatic, operational, or capital costs of any of the partnering organizations, including staff wages or fees paid to independent consultants serving in the role of employees. *If you're unsure about whether a cost is eligible for MSI funding, please include it in your budget. You will not be penalized for including ineligible costs in your budget, and understanding the true cost of partnership development helps the MSI to regularly evaluate and improve our grantmaking.*

File Size Limit: 2 MB

Budget

Please use only as many rows as you need.

Expense Item ("consultant", "meeting facilitation", etc.")	Description (name of consultant, type of services, etc.)	Cost	Requesting MSI Funds?

What is the requested grant amount?*
Character Limit: 20

Proposals

For each consultant or service provider for which you are seeking funding, please attach a related proposal or scope of work summary provided by the consultant or service provider. The document should include the following:

- A description of the work to be done or services to be provided

- A project timeline or timeframe

- A budget/fee

- Information about the person or person(s) that will provide the services, including name, title, affiliation, and relevant expertise

If none of the expenses in your budget involve a consultant or service provider, please upload a note stating as much.

Proposal #1*
File Size Limit: 2 MB

Proposal #2
[if applicable]
File Size Limit: 2 MB

Proposal #3
[if applicable]
File Size Limit: 2 MB

Proposal #4
[if applicable]
File Size Limit: 2 MB

Choosing a Consultant*

Briefly describe your process for selecting consultants and/or service providers. If applicable, include any prior projects for which you engaged the services of these firms.

Character Limit: 1500

Additional Project Funding

Please describe any additional funding available for this partnership development project. This may include funds allocated by the partnering organizations, project grants, or other sources or funding. If you have applied for and/or received grants for this partnership development project, please list the source, amount, and status of those grant requests.

Character Limit: 2000

Board of Directors - Pre-Exploratory

Board List*

Please provide a list of your organization's board members' names and professional affiliations using whichever of the following methods is easiest for you:

- Provide a link to a webpage that includes your board list.
- Enter your board list below.
- Upload your board list on a single-page document.

Please Note: This information is used to identify any potential for conflicts of interest among the grant review panel.

Character Limit: 2500 | File Size Limit: 3 MB

Board Support*

Indicate if your board has done **any** of the following in support of the proposed strategic partnership. *Please check all that apply, but only one form of board engagement is required for your application to be considered.*

This information is important because research has shown that significant board engagement plays a key role in developing successful partnerships.

Choices

Formed a board committee
Passed a board resolution in support of the process
Determined that the proposed partnership aligns with the organization's current strategic plan
Other (Enter details below)

Other Board Support

If you selected "Other" above, please describe.

Character Limit: 500

Evidence of Board Support*

Please upload evidence of the board support indicated above. This may include a board resolution, meeting minutes, or similar documentation.
Your grant application will not be considered without written evidence that the Applicant's board supports this project.

File Size Limit: 1 MB

Board of Directors - Exploratory & Implementation

Board Lists*

Please provide a list of *each partnering organization's* board members' names and professional affiliations using whichever of the following methods is easiest for you:

- Provide a link to a webpage that includes your board list.

- Enter your board list below.

- Upload your board list on a single-page document. If you need to upload more than one board list, you will be able to upload additional files at the end of this application.

Please Note: This information is used to identify any potential for conflicts of interest among the grant review panel.

Character Limit: 5000 | File Size Limit: 1 MB

Board Support*

For *each partnering organization*, please describe the actions the Board of Directors has taken in support of the proposed strategic partnership. Actions may include forming a board committee, passing a resolution in support of the process, determining that the partnership aligns with the organization's current strategic plan, and/or another indication that the board is a willing and engaged part of developing this partnership.

This information is important because research has shown that significant board engagement plays a key role in developing successful partnerships.

Character Limit: 2000

Evidence of Board Support*

For *each partnering organization*, please upload evidence of the board support indicated above. This may include a board resolution, meeting minutes, strategic plan, or similar documentation.
Your grant application will not be considered without written evidence that the Applicant's board supports this project.

Partner #1 - Board Support*

File Size Limit: 1 MB

Partner #2 - Board Support

[if applicable]

File Size Limit: 1 MB

Partner #3 - Board Support

[if applicable]

File Size Limit: 1 MB

Partner #4 - Board Support

[if applicable]

File Size Limit: 1 MB

Financial Statements & Additional Attachments

Audited Financial Statements*

Please upload a copy of the applying organization (Partner #1)'s most recent audited financial statements. If the Applicant is not required to have their financial statements audited, please upload the organization's most recent 990.

File Size Limit: 4 MB

Current Year Budgets*

Please upload a current fiscal year operating budget for each partnering organization. Organizations may be contacted for additional financial information if needed.

Partner #1 - Current FY Budget*

File Size Limit: 2 MB

Partner #2 - Current FY Budget

[if applicable]

File Size Limit: 2 MB

Partner #3 - Current FY Budget

[if applicable]

File Size Limit: 2 MB

Partner #4 - Current FY Budget

[if applicable]

File Size Limit: 2 MB

Additional Attachments

[optional]

If there are any additional files that you would like to include in your application, please upload them here.

Optional Attachment 1
File Size Limit: 2 MB

Optional Attachment 2
File Size Limit: 2 MB

Optional Attachment 3
File Size Limit: 2 MB