

Leadership Success Academy
2011 APPLICATION

PART ONE: TO BE COMPLETED BY BOARD MEMBER

Please type or clearly print the following information:

Name of applicant: _____

Mailing address: _____
(Street) (City) (State) (Zip)

Telephone: _____ Fax: _____ E-mail: _____

Years of residency in the Keys _____ Years of experience as a nonprofit board member _____

Please select **one** nonprofit organization for which you **CURRENTLY** serve on the board, and have at least one year of service in your board term remaining. Organizational Name: _____

Please briefly answer the following questions:

1. How long have you served on this board?
2. What do you perceive to be your board's greatest strengths and weaknesses and why?
3. What do you perceive to be your board's greatest challenges and/or opportunities and why?
4. Describe what you hope will be the outcome for your board as a result of this program.
5. Describe what you hope to gain from this program as an individual board member.

Leadership Success Academy 2011 APPLICATION

PART ONE: continued

Program Requirements

Note: It is highly advisable to discuss the following commitment requirements and questions that follow with your board and Board Chair prior to submitting application.

- CEO/ED* agrees to attend the Roles and Responsibilities session held on March 3rd. Optimal benefit will be achieved if the CEO/ED also attends the final session on Strategic Planning on April 7th.
- Optimum benefit is received from the Academy if a board member attends all five sessions at the Doubletree Grand Key Resort:

Thursdays- February 17th, 9:00 am-5:00 pm
March 3rd, 1:00-5:00 pm
March 17th, 1:00-5:00 pm
March 31st, 1:00-5:00 pm
April 7th, 1:00-5:00 pm with graduation from 5:00-7:00 pm

In the event you cannot attend a session, you may send a substitute in your place; however, certification and grant eligibility would be forfeited.

- Board members agree to complete course readings (homework) as assigned.
- Board members agree to work with the CEO/ED* to implement a leadership improvement project.
- Board members must complete evaluations of the training sessions and the overall program and the baseline and follow-up surveys.
- Board members and CEO/ED* must attend the graduation reception on April 7th, 5:00-7:00 pm.

Applicant: _____ Date: _____
(Please Print Name) (Signature)

Submit completed and signed application with all required documentation to the Community Foundation of the Florida Keys Center for Nonprofit Excellence **on or before January 31, 2011**

**Mail To: Community Foundation of Florida Keys
Center for NonProfit Excellence
300 Southard Street, Suite 201
Key West, FL 33040**

If you have any questions, please contact Lisa Gray, CFFK/CNPE, 305.292.1502 or cffk@cffk.org .

* The person responsible for the day-to-day operations of the organization

Leadership Success Academy
2011 APPLICATION

PART TWO: TO BE COMPLETED BY CEO/ED* AND BOARD CHAIR

NOTE: ONLY ONE PART TWO REQUIRED PER ORGANIZATION

Please briefly answer the following questions. Please type or clearly print the following information:

Organizational Name: _____

Mailing Address: _____
(Street) (City) (State) (Zip)

Telephone: _____ Fax: _____ E-mail: _____

Type of Organization: (circle one) Arts & Culture Educational Environmental & Animal Health Services
Human Services Religious Public/Social Service Other: _____

Population(s) served: ___ General Public ___ Infant/Babies ___ Children/Youth ___ Adults ___ Elderly

Annual Organization Budget Total: \$ _____ IRS Federal ID# _____

Name/Title of CEO/ED*: _____ E-mail: _____

Number of full-time staff: _____ Number of volunteers: _____

Total number of board members: _____

On a scale of 1 to 5, with 1 the lowest and 5 the highest, rate the following:

1. Board members' awareness of their roles and responsibilities 1 2 3 4 5 NA
Explanation:
2. Is there at least 65% board attendance at each board meeting? Yes No
3. Do board members have term limits? Yes No
4. Does 100% of your board make an annual financial donation? Yes No
5. Rate the effectiveness of your board's fundraising efforts. 1 2 3 4 5 NA
6. What do you perceive to be your board's greatest strengths and weaknesses and why?
7. What do you perceive to be your board's greatest challenges and/or opportunities and why?

*The person responsible for the day-to-day operations of the organization

Leadership Success Academy
2010 APPLICATION

PART TWO: TO BE COMPLETED BY CEO/ED* AND BOARD CHAIR

Please submit the following documentation in the checklist below with your completed application:

Check off each document that you have included with your application:

- ___ 501 (c) 3 IRS determination letter
- ___ List of current Board of Directors
- ___ Completed questionnaire (responses required to all questions)

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- Board members and CEO/ED* must attend the graduation reception on April 7th, 5:30-7:30 pm.

Approval of Board Chair and CEO:

I have discussed this with and approve submission of applications for the following board members:

I agree to all of the program requirements listed above and certify that the applicant organization does not discriminate on the basis of race, creed, color, gender, age, sexual orientation, national origin or disability.

Board Chair: _____
(Please Print Name) (Signature) (Date)

CEO: _____
(Please Print Name) (Signature) (Date)

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