



IFMA ATLANTA COMMUNITY PARTNER PROGRAM

Since 1997, IFMA Atlanta has utilized the strength of our membership to improve non-profit organization facilities in the Atlanta area and, at the same time, promote the profession of facility management. With the help, support, in-kind donations, and services of our professional and associate members, we have assisted with the completion of many projects, saving nonprofit organizations thousands of dollars and enabling them to renovate and maintain their facilities with minimum impact on their operating programs. In some cases, IFMA members serve on their Boards and represent IFMA when needed to aid in obtaining grants for capital projects.

Applications for partnership are received in May of each year for the coming July through June program year. Upon acceptance for partnership, each nonprofit is assigned a Team Leader who coordinates the activities of the Committee to assist the partner in developing and implementing a plan to effectively achieve their facility goals.

Applications for 2013 are to be submitted by email no later than May 31, 2013, to Bob Thomas at Association Headquarters, bob@ahqi.com. Electronic submission of all required materials is preferred; however, supplemental information may be mailed to IFMA Atlanta Community Services Committee, Association Headquarters, 665 Red Oak Road, Stockbridge, GA 30281.

In submitting this application, the partnering agency is agreeing to:

- Have a Strategic Plan and operating/capital budget that supports at least three facility-related goals for the coming year.
- Work in partnership with the Committee and Team Leaders.
- Attend and participate in the monthly IFMA Atlanta Community Services Committee meeting.
- Submit a monthly progress report to the Committee Chairs.
- Attend Quarterly IFMA Atlanta Lunch and Learn Programs (approximate cost \$25 each).
- Attend the Annual IFMA Luncheon honoring our Community Partners in July.

On behalf of my agency, _____,
I agree to the above terms of partnership.

Name and Title

Signature

IFMA ATLANTA COMMUNITY PARTNER APPLICATION

Organization Name _____

Contact _____

Address _____

Phone _____ **Fax** _____

Email _____ **Website** _____

Is this office the headquarters of your organization? _____

Is this office a branch/chapter or local affiliate of a national organization? _____

If so, where is your organization headquarters? _____

Organization Contact _____

Address _____

Phone _____ **Email** _____

Facility Contact _____

Address _____

Phone _____ **Email** _____

Provide a brief history of your organization, beginning with your overall mission and including your impact in the metro Atlanta community. _____

Please describe your facilities – location, purpose, age, square footage, and condition. _____

Please list three (3) facility-related goals or projects for your organization for the upcoming year appropriate for assistance from IFMA:

1. _____
2. _____
3. _____

What is your annual total operating budget from the current or most recent fiscal year?

What portion of this is your budget for facilities for the upcoming year? _____

Do you have a preventative maintenance program? _____

Do you have an annual budget for maintenance? _____

How much? _____

Please list your current income sources, including grants, fees, donations, etc. _____

Do you have an annual fund raising campaign? _____

Have you had a capital campaign recently, and do you contemplate one in the near future?

Please list and describe your current partnerships.

Current Community Partners, please describe the impact on IFMA on your organization over the past year, including updates on facility related goals defined in last year's application.

Please include copies of 501(c)(3) determination letter, most recent audit, list of current Board Members, and any other source documentation which would be helpful in describing your organization to the selection committee.