

## 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 April 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 are to be submitted to: IFMA Atlanta Community Services Committee

**Association Headquarters** 

665 Red Oak Road Stockbridge, GA 30281

## Partnering agencies are expected 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 the IFMA Atlanta Facility Workshops at the annual Georgia Center for Nonprofits Summit.
- Attend Quarterly IFMA Atlanta Lunch and Learn Programs on Facility Management.
- Attend the Annual IFMA Luncheon honoring our Community Partners.

## IFMA ATLANTA COMMUNITY PARTNER APPLICATION

Organization Name		
	Fax	
Email	Website	
Is this office the headquar	ters of your organization?	
Is this office a branch/cha	pter or local affiliate of a national organizatio	n?
If so, where is your organi	zation headquarters?	
Organization Contact		
Address		
	Email	
Facility Contact		
	Email	
	your organization, beginning with your overal	_

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