

#### **MEMBERSHIP APPLICATION 2021**

1. Save this form to your computer and complete it electronically

**Executive Director/ Chief Executive** 

- 2. E-mail form to forms@communityshares.org with "Membership Application" in the subject line
- 3. Collect documents listed on the checklist and complete the form;
- 4. Print and sign Membership Agreement (Executive Director & Board President/Chairperson must sign)
- 5. Email your checklist, signed Membership Agreement and other documents to: <a href="mailto:forms@communityshares.org">forms@communityshares.org</a>

ALL APPLICATIONS MUST BE SUBMITTED BY 5:00 PM ON FRIDAY, APRIL 9, 2021 PLEASE SEE CHECKLIST ON PAGE 6 FOR SUBMISSION INSTRUCTIONS

# **Organizational Information**

General					
Name of Organization:					
Federal EIN:					
Date of Non-Profit Incorporation					
Number of Years in Operation:	<u> </u>				
(Member applicants must have been in operation at least two year	ars prior to joining.)				
Mission Statement:					
Website URL:					
Phone Number:	Fax Number:				
Mailing Address:					
We use a P.O. box as our mailing address	☐ Yes ☐ No				
Are you a membership organization?					
Are you a fiscal agent for any projects, unincorporated grou	ıps, or individuals? ☐ Yes ☐ No				
If yes, please list.					

Name	:		Phone:	
E-mai	l Address:			
Perso	on Completing F	Form (if different from above)		-
Name	:		Phone:	
Title:				
E-mai	l Address:			
Board	d Information			
Board	Chair or President	t Name:	Phone:	
E-mai	l Address:			
Othe	r Information			
Fiscal	Year Ends:			
Total /	Amount of FY2020	Board Approved Expense Budget:		
Total /	Amount of FY2021	Board Approved Expense Budget, i	f available:	
Numb	er of Paid Full Tim	e Employees:		
Numb	er of Paid Part Tim	ne Employees:	_	
(Note:	you must have a mir	nimum of a ½ time employee paid by the	e organization to be	a Shares member.)
Numb	er of Volunteers (F	Regular, Per Year)		
Numb	er of Volunteers (C	Occasional Per Year)		
Appro	ximate Number of	Volunteer Hours/Units Per Month		
Appro	ximate Number of	Volunteer Hours/Units Per Year		
Office	Hours (days and t	imes):		
(Share	s members are requ	uired to have a dedicated office space ar	nd phone line and k	eep scheduled office hours.)
		Questionna	nire	
	What are the goals	s of your organization?		
		, ,		
What are the programs and/or activities of your organization?				

What kinds of challenges does your o	organiz	zation	face i	n achi	eving its goals?	
Are you a member of a United Way o			-			′es 🗌 No
If yes, please describe and provid	e amo	unt pr	ovide	d to yo	ur organization last year:	:
	o follo		: 4		th value arganization's pre	
Diagga girals the priority of each of the						
Please circle the priority of each of th (Scale of 1 being do not focus on it to 5 b	eing th	_		4	5	
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(Scale of 1 being do not focus on it to 5 b Advocacy Policy Education	1 1 1 1	2 2 2	3 3 3	4 4 4	5 5	-,-
(Scale of 1 being do not focus on it to 5 b Advocacy Policy Education Direct Service	1 1 1	2	3	4	5	-,-
(Scale of 1 being do not focus on it to 5 be Advocacy Policy Education Direct Service Social Change	1 1 1 1	2 2 2 2	3 3 3 3	4 4 4 4	5 5 5	-,-
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# **Affirmations**

1.	which outlines membership criteria, dues and participation requirements.					
	☐ Yes ☐ No For questions contact Cynthia Ries by email at cynthia@communityshares.org					
2.	Applicants must provide a <u>board resolution</u> (a written statement created by the organization's board of directors documenting a decision) approving this application to Community Shares. <i>We have prepared a board resolution and will attach it to the this membership application.</i> Yes  No					
	If you are not able to attach a board resolution, please explain why and when it might be expected:					
3.	We understand that Shares members pay annual dues. NOTE: Currently, dues for new members are based on your organizational expenses from the previous year and may be as much as \$2,500 the first year. Every year thereafter, member dues are based on campaign revenues, according to a sliding scale.  ☐ Yes ☐ No					
4.	Member organizations are required to fulfill an annual 50-point work commitment to Community Shares.  We are willing to assign a staff member(s) the responsibility of seeing that your commitment is fulfilled.					
	☐ Yes ☐ No					
5.	We understand that we are required as a member to solicit at least two new campaign worksites each year.					
	☐ Yes ☐ No					



## **CHECKLIST - PLEASE PRINT THIS PAGE AND SUBMIT**

After e-mailing your application, please email, mail (mailed material must be <u>received</u> by the due date) or deliver the signed original of each of the following to Community Shares. Your Application is not considered complete unless <u>ALL ITEMS BELOW</u> are included and your 2021 Membership Agreement is signed by both parties. <u>PARTIAL APPLICATIONS WILL NOT BE REVIEWED</u>.

Attach electronically or mail so that it is received by the due date:    Organization's 501(c)(3) status notification letter from the IRS "IRS Letter of Determination" 2016 or later   Copy of completed <i>Verification of Registration with the State of Ohio Attorney General's Office</i> Online Form   (www.ohioattorneygeneral.gov/NonprofitRegistration/Verification)   State of Ohio Certificate of Continued Existence Form (obtained from Secretary of State)   List of Board of Directors with term of office and affiliations   Most recent IRS form 990 (signed in blue ink by the chief officer of organization)   Most recent Audited Financial Statement or Independent Financial Review (revenues over \$100,000)   OR for revenues below   Profit & Loss Statement and Balance Sheet for year-end (corresponding to IRS Form 990)   Current Board- approved operating budget and corresponding statement of income and expenses 2020 and 2021 if applicable   Board resolution approving application to Community Shares (if not available at the time of the application, you must be able to provide this before May 2021).
Non-Discrimination Policy  ☐ Nost recent Annual Report, and any collateral materials you would like to include that stated the direct health and human service benefits you are providing.  ☐ Code of Regulations (By-laws)  ☐ Strategic Plan, Brochure or any other collateral (can be mailed separately)
<ul> <li>EMAIL by Friday, April 9, 2021 at 5 pm to: forms@communityshares.org</li> <li>ONE COPY of this checklist</li> <li>ONE SIGNED COPY of the Membership Agreement (Print next page and scan to email. Electronic signatures are not accepted.)</li> <li>PLEASE E-MAIL THE APPLICATION TO cynthia@communityshares.org         KEEP COPIES FOR YOUR OWN FILES.</li> </ul>
I have read the enclosed membership requirements as listed in the Membership Agreement and Shares Policies & Procedures document, and attest to the ability of this organization to fulfill them.
Organization
Executive Director's Name
Date



### 2021 Membership Agreement

- 1. **Membership Criteria and Participation Requirements** must be maintained throughout the year by each member (See Policies and Procedures).
- 2. **Mergers or Strategic Alliances:** Members who are considering any kind of merger, strategic alliance, or change in their organization are required to contact the Shares Executive Director at the start of discussions, as per the Policies & Procedures and keep Shares informed of any status change.
- 3. **Annual Work Commitment:** each member shall assign a Shares member representative and contribute an annual minimum of 40 points. Distribution of undesignated pledges to Community Shares will be reduced to the extent members fail to achieve this minimum (See point value chart). Earning and keeping track of points is the responsibility of the member organization and NOT the staff of Community Shares.
- 4. **Worksite Campaigns:** each member agrees to actively participate in the Annual Campaign (i.e. make presentations, drop-offs/pickups) and assign a staff person to be campaign coordinator.
- 5. **Community Shares Identity:** all members will clearly identify themselves as members of Shares by including "Member of Community Shares" logo on letterhead, publications and printed and electronic materials. Members shall maintain a current website, have on it an active hyperlink to the Shares website, and provide Shares with a current brochure or fact sheet.
- 6. Annual Dues and Financial Assessments: members will pay annual dues and other financial assessments as decided by the Board of Directors. Invoices for annual member dues are mailed in the summer/fall and payable upon receipt.
  Members with outstanding dues on August 1st may be excluded from the campaign brochure and subject to immediate membership suspension or termination.
- 7. **Annual Member Information Update:** members shall sign and complete the Annual Member Information Update by the deadline and provide the necessary documents requested (see Membership Criteria).
- 8. **Financial Information:** members will provide evidence of an adequate system of accounting and financial management; this includes submitting signed financial information by deadline for State of Ohio CCC eligibility; members failing to comply will be excluded from the campaign (See Membership Criteria & Participation Requirements). **Members are required to enroll in combined campaigns via Community Shares and no other federations, as it takes from valuable operating revenue for Community Shares (See Membership Policies & Procedures).**
- 9. **Community Shares Campaign:** each member shall conduct a Community Shares campaign annually within its own organization or risk loss of their undesignated distributions. Each member is to provide two Access Committee leads to gain new workplace campaigns in the coming year and participate in recruiting and securing these campaign leads.

<u>CERTIFICATION:</u> We have read and understand the above requirements and standards for membership in Community Shares and confirm that our organization complies with the Membership Criteria and Participation Requirements. We understand that failure to maintain the above may result in membership suspension or removal, according to the Code of Regulations. We recognize that members of Community Shares are responsible for its health and well-being. We acknowledge that this responsibility includes keeping Community Shares' staff informed about any major changes in our organization. We also certify that, as of this date, our organization "does not knowingly employ individuals or contribute funds to entities or persons on either the U.S. Department of Treasury's Office of Foreign Assets Control Specially Designated nationals List or the Terrorist Exclusion List. Should any change in circumstances pertaining to this certification occur at any time, the organization will notify Community Shares immediately."

Organization Name						
President's/Chairperson's Name	*President's/Chairperson's Signature	Date				
Executive Director's Name	*Executive Director's Signature	 Date				