

Faith-Based Certification Application Operation Transformation

Part I Identification of Applicant

1 Full name of organization (exactly as it appears in your organizing document)	
2 Mailing address (number and street)	3 Employer Identification Number (EIN)
City or town, state or country, and ZIP + 4	4 Phone: Fax: (optional)
5 Primary contact (officer, director, trustee, or authorized representative)	6 Organization's website: Organization's email:
7 Date incorporated if a corporation, or formed, if other than a corporation MM/DD/YYYY ____/____/____	

Part II Organizational Structure

1 <u>Formation</u> . Are you a corporation? If "Yes," attach: a. Articles of Incorporation b. State of Michigan filing endorsement/certificate c. Any amendments d. Most recent Michigan Information Update	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2 <u>Dissolution</u> . Does your organization provide for the distribution of assets upon dissolution? If "Yes," note page, article, and paragraph. _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3 <u>Bylaws</u> . Have you adopted bylaws? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4 <u>Adherence to Bylaws</u> . Do you follow the guidelines established in your bylaws? If "No," attach an explanation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part III Description of Your Activities

1 <u>Purpose</u> . Does your organization have a purpose, mission, and/or vision statement? If "Yes," attach.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2 <u>Activities</u> . Using an attachment, describe your <i>past</i> , <i>present</i> , and <i>planned</i> activities in a narrative. You may also attach representative copies of newsletters, brochures, annual report or similar documents for supporting details to this narrative. _____		

Part IV Directors, Officers and Board Members

1 <u>Board Members</u> . Attach a list of the names and mailing addresses of all of your board members. Indicate how long they have served on your board and when their terms expire. Also, describe compensation, if any.		
2 <u>Board Policy Handbooks</u> . Do you have board policy handbooks? If "Yes," attach a copy. If "No," explain how you train your board members on the mission, issues, and policies of your organization.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3 <u>Board Meetings</u> . Do you hold board meetings in accordance with your bylaws? If "Yes," attach copies of minutes of board meetings held within the last twelve months.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4 <u>Officers</u> . Attach a list of the names and mailing addresses of all the board officers. Indicate how long they have served and when their terms expire. Also, describe compensation, if any.		

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- 5 Relationships. Are any of your officers, board members, or employees related to each other? If "Yes," attach a list identifying the individuals and explain their relationship. Yes No
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Part V Fundraising

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- 1 Fundraising. Do you undertake fundraising? If "Yes," attach an explanation of your fundraising activities. If "No," describe the source of your funds. Yes No
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- 2 Designated Gifts. Do you have a policy for gifts designated for a specific purpose? If "Yes," attach a copy of your policy. Yes No
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- 3 Tax Receipts. Do you have a policy regarding tax receipts for contributions? If "Yes," attach a copy of your policy as well as a sample of a tax receipt. Yes No
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Part VI Financial and Tax Data

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- 1 Financial Statement. Attach your most recent financial statement. Include a statement of revenue, expenses and debt.
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- 2 Audit. Do you have a periodic audit? If "Yes," describe frequency and attach a copy of your most recent audit. Yes No
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- 3 Cash Policy. Do you have a written policy for handling cash? If "Yes," attach a copy of the policy. If "No," attach a description of how cash is handled. Yes No
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- 4 Check-signing Policy. Do you have a written policy for check-signing? If "Yes," attach a copy of the policy. If "No," attach a description of how check-signing is handled. Yes No
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- 5 Exempt Status. Attach a copy of your federal tax-exempt determination letter.
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Part VII Faith-Based Status

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- 1 Do you consider yourself to be a *faith-based organization*? Yes No
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- 2 Do you have a statement of faith? If "Yes," attach a copy of your statement of faith. Yes No
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- 3 Attach a brief description of your organization demonstrating your faith-based history.
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Part VIII Governance

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- 1 Orientation, Training, and Evaluation Plan. Do you have a plan for orienting, training, and evaluating your volunteers and employees? If "Yes," attach the plan or a description of the plan. Yes No
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- 2 Volunteer Recruitment. Do you have a recruitment plan for succession and transition of your volunteer leadership and employees? If "Yes," attach the plan or a description of the plan. Yes No
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- 3 Conflict of Interest. Do you have a conflict of interest policy? If "Yes," provide a copy of the policy. Yes No
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- 4 Employee Compensation. Do you have an employee compensation policy? If "Yes," attach a copy of the policy. If "No," explain how compensation decisions are made in your organization. Yes No
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- 5 Audit Committee. Do you have an audit committee and audit policies and procedures? If "Yes," attach the names of the members of the committee and copies of the policies and procedures. If "No," explain how you audit your organization. Yes No
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7. Insurance. Do you carry liability insurance for a) directors and officer; b) volunteers; c) employees; d) general liability; and e) casualty? If "Yes," attach copies of your certificate(s) of insurance. Yes No
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8. Contracts. Do you have a policy for approving financial contracts? If "Yes," attach a copy of the policy. If "No," explain how contracts are approved by your organization. Yes No
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9. Sales Tax Records. Do you have sales greater than \$5000.00? If "Yes," attach most recent Michigan Annual Sales Tax Report. Yes No
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10. Employee Tax Records. Do you have employee tax records (I-9s and W-4s) on file? Yes No
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Part IX Risk Management

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1. Do you have policies and procedures on investigating backgrounds for employees, board members, and volunteers? If "Yes," attach a copy. Yes No
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2. Do you have a policy addressing abuse and inappropriate contact? If "Yes," attach a copy. Yes No
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3. Do you have a policy describing incident reporting procedures? If "Yes," attach a copy. Yes No
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4. Does your organization work with children and/or youth? Yes No
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5. Do you have a policy regarding adult supervision? Yes No
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