

## Pro Bono Partner Application

### Organizational Information

Name	
Street Address	
City / ST / ZIP Code	
Phone Number	
Website URL	

### Contact Information

Name	
Title	
Phone Number	
E-Mail Address	

### Organization Details

Year of Founding	
Briefly describe your non-profit status or designation.	
Number of Employees	
Number of Full-time Paid Employees	
Annual Budget for Previous Year	
% Programming	
% Overhead	
Do you have a Board of Directors?	
Primary Sources of Funding	
Do you have an Annual Report?	

## Organizational Description

Provide a brief description of your organization's mission and history.

## Services Provided

Provide a description of the work your organization performs and the services offered.

### Pro Bono Services

Specifically state your current challenge, the M Powered Strategies services you are requesting, and the objectives you wish to achieve.

### How Did You Learn About Us?

Please let us know how your organization learned about the M Powered Strategies Pro Bono Program.

### Agreement and Signature

By submitting this application, I affirm that the facts set forth are true and complete. I understand that if I am accepted as a pro bono partner, any false statements, omissions, or other misrepresentations made on this application may result in applicant dismissal or contract annulment.

Name	
Signature	
Date	

### Submission

Once this application is completed please email it to M Powered Strategies Community Engagement Manager Kat McDonald at [Kathryn.McDonald@mpoweredstrategies.com](mailto:Kathryn.McDonald@mpoweredstrategies.com).