



Public Interest Fellowship Program Partner Organization Application

-- Remember to **download** and **save** this application before filling it out. --

I am applying to employ a summer/yearlong PIFP fellow (check one): Summer Yearlong

Organization name + abbreviation: _____

Organization city: _____

Website URL: _____

Executive Director: _____ Fellow's supervisor name: _____

Contact name: _____ Title: _____

Contact email: _____ Contact phone: _____

How many staff members does your organization employ? _____

Organization mailing address: _____

Has your organization employed PIFP Fellows as a Partner Organization in the past?

No **Yes for the:**
 Summer, years →
 Yearlong, years →

The PIFP offers limited capacity grants to supplement the cost of hiring a fellow. We offer up to \$6,000 for yearlong partners and \$1,000 for summer partners. Please note that you must demonstrate financial need in order to qualify for this capacity grant. Indicate this need below, if applicable.

My organization does not require a grant to cover the fellow's _____ salary.

My organization requires a grant to employ a _____ fellow.

\$ _____ ← This is the amount my organization needs in order to participate.

Feel free to tell us more information here.



Detailed Information Regarding the Fellowship

NEW in 2019: The PIFP requires **Denver + Boulder** organizations to offer **2 additional benefits** (ex: \$400/month rent stipend, gym membership, bus pass, etc). These benefits supplement the salary.

If you're located in Denver or Boulder, what stipends will you offer? How much will this amount to annually?

How will your PIFP fellow build capacity in your organization?

How will your PIFP fellow's work contribute to societal systemic change?

If applicable, what direct service will the PIFP fellow be carrying out (ex: teaching college access classes)? What impact will this direct service have in your community?

What skills will your fellow learn/hone during this fellowship?

How will you support your fellow during this first professional experience? How can CC support you?

What else should we know about your organization? (*e.g., staff transitions, training opportunities, etc.*)

Indicate that you are attaching the following required materials with this application form:

- A completed Fellowship Description form
- Your organization's current FY budget
- Your organization's most recent audit or year-end financial statement
- Your organization's primary funding source(s) and how it will fund the PIFP fellowship
- Your organization's IRS determination letter