# AmeriCorps NCCC

#  Service Project Concept Form

This form will help AmeriCorps NCCC determine if the organization’s project concept meets the basic criteria for a service project. Upon review, the regional Program Office will notify the organization of its status and the next steps in the Project Application process.

Organization Name: Click here to enter text.

Organization Representative: Click here to enter text.

Mailing Address: Click here to enter text.

City: Click here to enter text. State: State Name Zip+4: ##### - ####

Telephone: Click here to enter text. Fax: Click here to enter text.

Email: Click here to enter text. Website: Click here to enter text.

1. Provide a brief description of your organization's mission.

Click here to enter text.

1. Provide a brief description about the service activities for which your organization is requesting a NCCC team. Please conclude your statement with the desired outcome expected from the involvement of NCCC.

Click here to enter text.

1. If different from the organization address above, please provide the primary address where the service activities will take place.

Address: Click here to enter text.

City: Click here to enter text. State: State Name Zip+4: ##### - ####

1. Check the box for the primary issue area that the project will address.

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| --- | --- |
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|  |  |

1. How many teams are being requested? Click here to enter text.

How many weeks will it take a team of 8 to 12 members working full-time (40-45 hours per week) to complete this project? Click here to enter text.

Proposed Beginning Date: Click here to enter text. Proposed End Date: Enter text.

These dates are [ ]  Fixed or [ ]  Flexible

1. What is your organization type? Check all that apply.

| [ ]  National Non-Profit | [ ]  Local Municipality | [ ]  National or State Park |
| --- | --- | --- |
| [ ]  Community or Faith-Based | [ ]  State Government | [ ]  Federal Government |
| [ ]  School | [ ]  Indian Tribe |  |
| [ ]  Other (please specify: Click here to enter text. |

1. In the event that housing is not available on the regional campus or your project is beyond a reasonable driving distance (1hr) from your regional campus, briefly describe the housing arrangements you are exploring for the team.

Click here to enter text.

1. Have you worked with a NCCC team previously? [ ]  Yes [ ]  No

If ‘Yes’, how many teams have served your organization? Click here to enter text.

If ‘Yes’, when did a team most recently work with your organization? Click here to enter text.

1. Do you currently or have you ever had a "Fee for Service" arrangement with a youth corps or conservation corps program?\* *(Fee for Service is defined as an agreement in which your organization pays fees or reimburses costs to a service program in exchange for member or team support).* [ ]  Yes [ ]  No

\*NCCC has effectively been used in past projects to augment and support existing youth corps partnerships with organizations. Please describe how your plan to utilize NCCC will incorporate your existing partnership with the "Fee for Service" corps.

Click here to enter text.

1. How did you find out about the NCCC? (check all that apply)

| [ ]  I am an NCCC Alum | [ ]  I am a past NCCC Sponsor |  |
| --- | --- | --- |
| [ ]  NCCC Staff Member | [ ]  NCCC Alumni | [ ]  Current NCCC Member |
| [ ]  State CNCS Office | [ ]  Outreach Presentation | [ ]  Previous NCCC Sponsor |
| [ ]  State Commission Community Service Office |
| [ ]  Other (please specify): Click here to enter text. |

Click here to enter text. Click here to enter text.

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Signature Date