Social Innovator Accelerator Application Questions

Application Questions

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Organization Information

Applicant Program or Organization Name*

Standalone organization or program within an organization?
Select one option
Standalone organization
Program within an organization

What is the name of your parent organization?

Is your organization a chapter or affiliate of a national organization?
Select one option
Yes
No

Social Issue Track*
Select one

Have you applied to the Social Innovator Accelerator before?*
Select one option
No
Yes

Application Author
First Name*
Last Name*
Title*
Email Address*

Organization Address*
Is your organization located within the catchment area of this track*

*Please note that the Climate Resilience track has a specific catchment area within Eastern MA. Please reach out to the SIF team if you have any questions.*

Date Organization/Program Founded*

Please upload your organization’s 501c(3) or fiscal agent documentation*
[file upload]

Website*
Facebook
Twitter
Instagram

Social Media - feel free to share links to any other platforms where you share information and news

Organization Contact Information

Director/CEO
First Name*
Last Name*
Title*
Work Phone*
Cell Phone
Email Address*

When did the Director/CEO start working with the organization?

Do you have a secondary contact?*
The secondary contact should be someone that might be involved with the SIF process should your organization be selected, e.g. the program director, development director, etc.
Select one option
No
Yes

First Name*
Last Name*
Title*
Work Phone*
Cell Phone
Email Address*

**Lead Innovator**

The Lead Innovator should be the leader of the program or organization and will be expected to attend all Social Innovation Forum sessions and present on behalf of their organization at the Social Innovator Showcase in May 2025.

1. Who is your organization’s lead innovator?*
   Select one option
   Director/CEO
   Secondary Contact
   Other
   First Name*
   Last Name*
   Title*
   Work Phone*
   Cell Phone
   Email Address*

2. When did the Lead Innovator start working with the applicant organization/program?*

3. When did the Lead Innovator assume their current title?*
4. What was the Lead Innovator’s previous place of employment and position?  
   (100 word maximum, no minimum word count)*

5. In their own words, please have the Lead Innovator explain what brought them to this work. (300 word maximum, no minimum word count)*

Program Model

1. Please describe what the applicant organization/program does:
   a. A short description of each program (400 word maximum, no minimum word count)*

   b. What is the cadence/frequency of your programs? (how often do program participants engage in/with programs, how frequently do you organize convenings, etc.) (200 word maximum, no minimum word count)*

   c. How many sites do you have and where are they located? (200 word maximum, no minimum word count)*

   d. What is unique about your approach compared to other nonprofits working to achieve similar outcomes? (300 word maximum, no minimum word count)*

   e. Dropdown - How would you describe the majority of your work: direct service, intermediary, advocacy, other (text box)*

   f. Is there anything else that you would like to share to help us gain a better understanding of what the applicant organization/program does and what you’re trying to accomplish? (300 word maximum, no minimum word count)

2. Please describe the applicant organization/program’s target population, including demographic information such as socioeconomic status, race, ethnicity, gender, sexual orientation, age, disability, language, etc. (300 word maximum, no minimum word count)*
3. Briefly describe the opportunity, challenge, issue, or need that the applicant organization/program works to address. How does this align with the social issue track you are applying for? Please refer to the track criteria on the SIF website. (400 word maximum, no minimum word count)*

**Reflection and Continuous Quality Improvement**

1. Please list three to five metrics (for 2023 - 2025) that the leadership team is using to measure outputs of the applicant organization/program. If you are applying for a program of an organization, please list the program's outputs.

Outputs measure “how much.” Examples include, but are not limited to:

- Number of program participants
- Number of hours of service provided
- Number of partners
- Number of campaigns
- Number of initiatives

<table>
<thead>
<tr>
<th>Metric/Output</th>
<th>2023</th>
<th>2024</th>
<th>2025</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metric/Output #1</td>
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<tr>
<td>Metric/Output #2</td>
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<td>Metric/Output #3</td>
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<tr>
<td>Metric/Output #4</td>
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</table>

2. What does success look like for the applicant organization/program? How do you track success and how do you know you are moving toward it? This question comes from the Philanthropy MA Common App. (400 word maximum, no minimum word count)*
3. Please provide examples of the applicant organization/program’s outcomes if applicable.

Outcomes measure change that occurs due to your program. Examples include, but are not limited to:

- Percentage of participants employed upon program completion
- Percentage of participants demonstrating improved conflict resolution skills
- Percentage of participants who graduate from high school

Outcome data may be shared via survey numbers, focus group notes, testimonials, etc. (400 word maximum, no minimum word count)*

**Goals**

Please describe the applicant organization/program’s priority goals for the next 2-3 years. (400 word maximum, no minimum word count)*

**Financial and Staffing Information**

Please provide the following information for the applicant organization/program. If you are applying for a program of an organization, please list the program’s financial and staffing information.

Please provide us with information for fiscal years 2022 through 2024. If your 2025 fiscal year is not complete, please estimate this information.
<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Revenue</th>
<th>Expenses</th>
<th>Paid Full-time staff</th>
<th>Paid Part-time staff</th>
<th>Board Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>2022</td>
<td></td>
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<td>2023</td>
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<td>2024</td>
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<td>2025</td>
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</tbody>
</table>

What is your fiscal year end?*

Optional Comments (300 word minimum, no maximum word count)

**Collaboration**

1. Is the applicant organization/program working with other organizations, coalitions, and/or networks to advance your mission? If so, please share THREE examples of these collaborations and the nature of the partnerships. (Please list up to 3 examples) (400 word maximum, no minimum word count)*

**Leadership and Team**

1. How does the applicant organization/program involve the members of the community served in decision-making and leadership? (400 word maximum, no minimum word count)*

2. How are the staff and board of the organization accountable to and reflective of the community it serves? (400 word maximum, no minimum word count)*

3. Describe what goals, if any, the applicant organization/program has developed around Diversity, Equity and Inclusion (DEI). How do you track progress toward these goals? *This question comes from the Philanthropy MA Common App.* (400 word maximum, no minimum word count)*
Fundraising

1. What is the applicant organization/program’s current breakdown of revenue sources?

For the most recent, complete fiscal year, please estimate the percentage of the applicant organization/program’s total revenue that comes from the following sources. (Total % must equal 100)

<table>
<thead>
<tr>
<th>Revenue Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation Grants (non-Corporate)</td>
<td></td>
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<tr>
<td>Corporate Grants</td>
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<tr>
<td>Individual Donations</td>
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<tr>
<td>Government Grants/Contracts</td>
<td></td>
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<tr>
<td>Earned Income (e.g., program and service fees, ticket sales, membership dues)</td>
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</tr>
<tr>
<td>Investments/Interest</td>
<td></td>
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<tr>
<td>In-kind Donations</td>
<td></td>
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<tr>
<td>Support from Parent Organization</td>
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<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

2. What are the applicant organization/program’s fundraising goals over the next year? (300 word maximum, no minimum word count)*

Capacity Building Support

1. Why do you think this year is the best time for the applicant organization/program to participate in the SIF’s capacity-building program? (How do you think the program can help your organization achieve its goals?) (400 word maximum, no minimum word count)*
Please refer to the Benefits to Social Innovators section on the SIF website for more information about what SIF can offer your organization/program.

2. Do you have plans to engage with any external coaches or consultants or to begin or work on a strategic plan from January-May of 2025? If yes, describe the nature and timing of the engagement. Due to the time-intensive nature of the first 6 months of the Accelerator and the forward planning that occurs during this time, we find it helpful to understand what other engagements you anticipate during that time. (400 word maximum, no minimum word count)*

Conclusion

1. Audited Financial Statements

   Please upload applicant organization/program’s audited financial statements.

   For programs and organizations that do not conduct their own financial audit, please upload a profit and loss statement or balance sheet.

   [file upload]

2. Strategic Plan (Optional)

   Applicant organization/program’s most recent business/strategic plan.

   [file upload]

3. Additional Document Upload (Optional)

   Additional existing document applicant organization/program would like to share with SIF. [file upload]