



## Fiscal Sponsorship Project Proposal

### Organization Information

Organization Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Social Media Handles: \_\_\_\_\_

### Project Overview

Project Title: \_\_\_\_\_

Project Location: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Expected End Date: \_\_\_\_\_

Brief Project Description: (2-3 sentences describing the project)

# Project Goals and Objectives

What are the primary goals of this project?

What specific outcomes do you expect to achieve?

How will you measure success for this project?

## Financial Information

**Total Projected Budget:** \$ \_\_\_\_\_

**How will the funds raised be used to help your cause?** (Please be as specific as possible)

**What do you hope to accomplish with the financial support you receive?**

**Are there any additional sources of funding for this project?** ☐ Yes ☐ No

If yes, please list:

**Fund Management**

**Who will be managing the funds received?**

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Do you have a separate bank account for this project?** ☐ Yes ☐ No

**How will you track and report on fund usage?**

**Administrative Responsibilities**

**Primary Administrative Contact:** (Person responsible for submitting required documentation in a timely manner)

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Team Members and Responsibilities:**

1. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

2. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

3. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

4. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

5. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

### **Who will be responsible for financial reporting?**

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **Who will be responsible for program/impact reporting?**

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## **Expectations from Fiscal Sponsor**

**What specific services or support do you expect from our organization? (Check all that apply)**

☐ Fund management and disbursement

☐ Tax receipting for donors

☐ Fundraising assistance

☐ Grant writing support

- ☐ Marketing and publicity
- ☐ Administrative support
- ☐ Technical assistance
- ☐ Networking opportunities
- ☐ Other: \_\_\_\_\_

**Please describe in detail what you expect our organization to do to support your project:**

**How often would you like to communicate with our organization?**

- ☐ Weekly    ☐ Bi-weekly    ☐ Monthly    ☐ Quarterly    ☐ As needed

**What is your preferred method of communication?**

- ☐ Email    ☐ Phone    ☐ Video call    ☐ In-person meetings
- ☐ Other: \_\_\_\_\_

**Are there specific deadlines or timeline considerations we should be aware of?**

**Are there any particular skills or expertise you’re hoping to access through our organization?**

**How do you envision the working relationship between our organizations?**

**Community Impact**

**What community or cause does this project serve?**

**What are some dangers that face this community/cause?**

**Who is affected by these issues?**

**What resources does your cause need the most right now?**

**Collaboration and Support**

**Who are your allies? List people and organizations helping you with this project:**



**Do you have any existing partnerships?**    ☐ Yes    ☐ No

If yes, please list:

**Are there opportunities for community volunteers to get involved?**    ☐ Yes    ☐ No

If yes, how?

**Public Outreach**

**Are there specific messages or quotes you would like included in informational materials?**

**Where can people find out more about this cause or get involved to help?**

**Can you share any photos regarding this cause/community?** ☐ Yes ☐ No

If yes, please attach separately or provide links

**Any additional information you want people to know about your project?**

If applicable, please attach additional documentation separately

## Agreement and Signature

By submitting this proposal, I confirm that all information provided is accurate and complete to the best of my knowledge. I understand that our organization will be required to adhere to the fiscal sponsor's policies and reporting requirements if approved.

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Submission Instructions

Please submit this completed form along with the following attachments:

1. Detailed project budget
2. Project timeline
3. 501(c)(3) determination letter (if applicable)
4. List of board members or leadership team
5. Any supporting materials that strengthen your proposal

**Submit to:** [weavingworldsteam@gmail.com](mailto:weavingworldsteam@gmail.com)