

# Nonprofit Management Institute

*Best practices in nonprofit management,  
leadership, and development*



[NetworkPeninsula.org/nmi](http://NetworkPeninsula.org/nmi)

## 2021 Training Funds

**NetworkPeninsula**, in partnership with the *Williamsburg Health Foundation*, is offering training funds for staff and board members of nonprofits located in the Greater Williamsburg area to attend classes at the **Nonprofit Management Institute** at Thomas Nelson Workforce Center.

For 2021, funds will be provided for individuals to obtain classes offered in various Certificate areas. Funds will be disbursed on a first come, first served basis and disbursed directly to the nonprofit organization, not to TNCC and not to the individual attending. All nonprofits meeting the criteria below are eligible to receive training funds. Funds will be provided at the NetworkPeninsula discounted member rate of \$75 per class for full day classes and \$50 for half day classes. If any nonprofit receiving funds is not a NetworkPeninsula member, they will be responsible for the difference (\$10 additional per class).

Once funds are disbursed, if the person receiving the training funds does not attend the entire class (attendance records will be kept and updated after breaks throughout the class day), the organization receiving the funds must reimburse NetworkPeninsula. (Note: NetworkPeninsula is not responsible for any refund requests due to non-attendance. These should be made directly to TNCC.)

Nonprofits applying for funds must meet the following criteria:

1. Organizations must serve James City or York counties or the cities of Williamsburg and Poquoson.
2. The agency's Executive Director must approve staff attendance and agree to reimburse cost for any classes not attended (for the entire class time) by the person for whom funds were given. (Attendance records will be kept and updated after breaks throughout the class day.) If the Executive Director is the attendee, the Board Chair must sign the form.
3. Organization must be a 501c3 nonprofit and file a 990 or 990EZ with the IRS. For agencies only required to file a 990N, they must also be registered with the VA Dept of Agricultural & Consumer Services, with a current Form 102 (annual charitable registration) on file with the VA Dept of ACS.
4. Nonprofit must provide services in the following areas:
  - o Civil rights, social action, and advocacy
  - o Crime and legal related
  - o Education
  - o Employment
  - o Food, agriculture, nutrition
  - o Healthcare
  - o Human services
  - o Mental Health
  - o Philanthropy, voluntarism and grant making
  - o Public safety, disaster preparedness & relief
  - o Recreation & sports
  - o Youth development

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## NetworkPeninsula.org/nmi

### APPLICATION for 2021 Training Funds

Funds are awarded on a first come, first served basis. They are only available to nonprofits serving the greater Williamsburg area, including James City and York counties, and Poquoson. However, if you serve York County, Newport News, Hampton, Gloucester and/or Poquoson, the *Bernardine Franciscan Sisters Foundation* also has training funds available. Please complete and return to Karen Dutro, Executive Director, NetworkPeninsula, via email or regular mail. Fax is not available.

[karen@networkpeninsula.org](mailto:karen@networkpeninsula.org), 2 Bernardine Drive, Newport News VA 23602

Organization \_\_\_\_\_ Are you a 501c3 organization? \_\_\_\_\_

Organization mailing address \_\_\_\_\_

Amount requested (maximum of \$75 for full day class and \$50 for half day class) \$ \_\_\_\_\_

Total number of people attending classes via this funding? \_\_\_\_\_

**Executive Director/Board Chair Agreement:** Your signature below acknowledges that the attendee(s) listed will be given time from work to attend the classes for which funding is provided.

You also agree to reimburse NetworkPeninsula for any classes paid for by NetworkPeninsula training funds but not attended (for the entire class time) by the individual(s) who received the funds. (Attendance records will be kept and updated after breaks throughout the class day.)

Executive Director (or Board Director if attendee is ED) Name \_\_\_\_\_

Executive Director/Board Chair Signature \_\_\_\_\_

Name of Attendee \_\_\_\_\_ Title \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Dates of Classes for which you are seeking funding? \_\_\_\_\_

Number of years at this organization \_\_\_\_\_ Number of years in this position \_\_\_\_\_

Position prior to joining your organization \_\_\_\_\_ Number of years \_\_\_\_\_

Name of Attendee \_\_\_\_\_ Title \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Dates of Classes for which you are seeking funding? \_\_\_\_\_

Number of years at this organization \_\_\_\_\_ Number of years in this position \_\_\_\_\_

Position prior to joining your organization \_\_\_\_\_ Number of years \_\_\_\_\_