

Incubate - BOARD REPRESENTATIVE Supplemental Application

Deadline: November 01, 2026 at 12:30 AM CDT

Board Representative Application

Board / Advisory Lead Contact

Organization Name and Primary Applicant Name

Please include the name of the individual (Founder, Executive Director) completing the primary Incubate Application

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Board Chair / Advisory representative Name *

Board Chair / Representative E-mail *

Board Chair / Representative Phone Number *

Your role in relation to this project / organization *

- ☐ Board Chair
- ☐ Advisory Chair
- ☐ Board Member
- ☐ Fiscal Sponsor Representative
- ☐ Congregational Leader
- ☐ Organizational Partner
- ☐ Other

How long have you been connected to this applicant or project? *

- ☐ Less than 6 months
- ☐ 6 months - 1 year
- ☐ 1-2 years
- ☐ More than 2 years

Empathizing: Your Relationship to the Work

How would you describe the organization's connection to the community, issue, or people they hope to serve? *

Max Number of Words: 150

What strengths do you see in the organization's leadership, particularly regarding listening, learning, and responding to community needs? *

Max Number of Words: 150

What should the Selection Committee understand about the organization's capacity, support system, or current leadership context? *

Max Number of Words: 100

Defining: The Need & Accountability

From your perspective, what problem or community need is this project trying to address? *

Max Number of Words: 100

How has the Board, Advisory group, or Leadership circle helped the applicant understand the need more clearly?

Max Number of Words: 150

How does this project remain accountable to the people or community it hopes to serve? *

Max Number of Words: 100

Ideate: Program & Strategy

How clear is the applicant's current program or service model? *

- ☐ Very clear
- ☐ Somewhat clear
- ☐ Still developing
- ☐ Not clear yet

What do you believe is strongest about the applicant's program idea or approach? *

Max Number of Words: 125

What area of the program model most needs refinement or support?

*Ex: target audience clarity, activities, staffing, partnerships, evaluation, accessibility**

Max Number of Words: 100

Prototype: Board Involvement & Progress

Which aspects of the work are Board, Advisory or Leadership members actively engaged in?

*Please select all that apply**

- ☐ Strategic Planning
- ☐ Fundraising
- ☐ Program Design
- ☐ Financial Oversight
- ☐ Community Connections
- ☐ Prayer or Spiritual support
- ☐ Evaluation or Feedback
- ☐ Governance development
- ☐ Not actively involved yet
- ☐ Other

What has the applicant already tried, launched or tested that gives you confidence in this work? *

Max Number of Words: 150

What role are you willing to fill if the applicant is selected for Incubate Partnership? *

Max Number of Words: 100

Testing: Growth, Readiness & Sustainability

What would meaningful growth look like for this project over the next 12 months? *

Max Number of Words: 150

What is one area where the applicant would benefit from coaching, accountability, or deeper planning? *

Max Number of Words: 100

How prepared is this Board, Advisory or Leadership group to support the applicant during Incubate Partnership? *

- ☐ Very prepared
- ☐ Somewhat prepared
- ☐ Still building
readiness
- ☐ Not prepared yet
- ☐ Not applicable

Please explain your above answer *

Max Number of Words: 100

Funding & Finances

What is your understanding of the project's current funding needs? *

Max Number of Words: 100

How is the Board, Advisory or Leadership group supporting fundraising? *

Max Number of Words: 100

What fundraising responsibilities do you believe the applicant shouldnot carry alone? *

Max Number of Words: 100

What is one financial or fundraising concern the Selection Committee should be aware of? *

Max Number of Words: 100

Receiving Support

What kind of support would most strengthen this applicant and project through partnership? *

Max Number of Words: 150

What topics would you most want the applicant and Board/Governance group to receive guidance in?

*Please select all that apply**

- ☐ Board Development
- ☐ Fundraising
- ☐ Grant Readiness
- ☐ Donor Cultivation
- ☐ Budgeting
- ☐ Program Development
- ☐ Program Evaluation
- ☐ Strategic Planning
- ☐ Partnerships
- ☐ Legal
- ☐ Communications / Marketing
- ☐ Conflict or Decision-Making
- Support
- ☐ Other

Do you recommend this applicant for Incubate Partnership? *

- ☐ Yes
- ☐ Yes - with some support
needed
- ☐ Not at this time
- ☐ Unsure

Please explain your above answer *

Max Number of Words: 150