

National Direct Consultation Form

Please do not modify this form

State Service Commission Contact Person Date of Submission	Wisconsin National and Community Service Board (Serve WI) Jessica Kessler, RFP Manager, jessica.kessler@wisconsin.gov					
Legal Applicant Information Organization (Legal Name) DUNS Number Contact Person Address Email Phone						
Type of AmeriCorps Grant Request	National Direct Fixed Price Award Education Award Professional Corps Indian Tribe					
AmeriCorps Program Model (check one)	National (members at local organizations directly controlled by parent) Affiliates (members at affiliates of parent – limited direct control) Consortium (members at independent organizations that interact on activities beyond AmeriCorps) Intermediary (members at unrelated organizations)					
Type of Application	New Application Recompete Continuation (Year __ of 3 Year Cycle)					
Proposed National Program Overview Program Name Start Date End Date						
Number of AmeriCorps Slots	Minimum Time	Quarter Time	Reduced Half Time	2 Yr Half Time	Half Time	Full Time
Total for Application						
Total in Wisconsin						
Total CNCS Budget Request within state						
Total Operating Budget						
Total Number of MSYs						
Cost per MSY						
Proposed Source of Match						

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AmeriCorps Program Focus <i>(brief narrative; community need being addressed)</i>	
Description of Primary AmeriCorps Program Activities <i>(Brief succinct description of how members will achieve the result. Explain exactly what members will be doing. Give a clear picture of member activity.)</i>	
Beneficiaries within the state	
Proposed Primary Outcome Target(s) <i>(include National Performance Measure numbers, if applicable)</i>	
Prior Years Data on Primary Performance Measure Outcome(s)	
Most Recent Completed Year Member Enrollment Rate	%
Most Recent Completed Year Member Retention Rate	%
AmeriCorps Program Staff <i>(How many staff in Wisconsin to oversee the program? If none in state, what staff will oversee?)</i>	
Role of National Direct Parent organization in Administration of Program at State Level <i>(i.e. site monitoring; background checks; accounting, training and development)</i>	
Skills and Resources to Share	
Date of Most Recent A133 Audit <i>(How were any findings resolved?)</i>	
Overview of Proposed Site(s) <i>(Provide the details for each Proposed Service Site. Submit separate document if needed.)</i>	
<div style="text-align: right;">Operating or service site?</div> <div style="text-align: right;">Location of site</div> <div style="text-align: right;">Number of members:</div> <div style="text-align: right;">Does this site oversee members from any other AmeriCorps program? If so, please name.</div>	
<i>(For each proposed site, provide the following information)</i>	
<div style="text-align: right;">Operating or service site?</div> <div style="text-align: right;">Location of site</div> <div style="text-align: right;">Number of members:</div> <div style="text-align: right;">Does this site oversee members from any other AmeriCorps program? If so, please name.</div>	

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(For each proposed site, provide the following information)

Operating or service site?

Location of site

Number of members:

Does this site oversee members from any other AmeriCorps program? If so, please name.

Alignment with Wisconsin State Service Plan

Please review the Wisconsin State Service Plan: <http://servewisconsin.wi.gov/documents/StateServicePlan.pdf>.

Describe how your AmeriCorps*National program aligns with the objectives of the 2016-17 State Service Plan.

Describe how your AmeriCorps program utilizes volunteers in order to enhance your delivery system.

Does your organization engage episodic volunteers (one-time projects/events), ongoing volunteers (ongoing commitment) or both?

Describe how your AmeriCorps members will be trained to engage volunteers in your program.

Which of the following eight (8) effective volunteer management practices does your program implement?

These best practices are defined in the "Volunteering Reinvented: Human Capital Solutions for the Nonprofit Sector" report at www.nationalservice.gov/pdf/07_0719_volunteering_reinvented.pdf. Select all that apply.

Market Research & Community Needs Assessment

Strategic Planning to Maximize Volunteer Impact

Recruiting & Marketing to Prospective Volunteers

Interviewing, Screening & Selecting Volunteers

Orienting & Training Volunteers

Ongoing Supervision & Management

Recognition & Volunteer Development

Measuring Outcomes & Evaluating Processes

Please answer Yes or No to the following statements:

Yes No

My program will nominate candidates for the **Governor Service Awards** (awards given by the Governor to exemplary supports of service in Wisconsin)

My program will nominate candidates for the **InterCorps Council** (a group of current and Alumni national service members working together to strengthen national and community service in Wisconsin)

My organization is registered (or will register) on the www.volunteerwisconsin.org website

My organization currently posts (or will post) volunteer opportunities at www.volunteerwisconsin.org

SUBMISSION INSTRUCTIONS

1. Complete and save this consultation form.
2. Submit this form to Jessica Kessler, Program Officer and RFP Manager, jessica.kessler@wisconsin.gov, prior to submitting your AmeriCorps*National application to CNCS.