

NOSSTIA Consultant Registry Online Application form

Date: _____

Name of individual consultant:

Name of consultant firm **OR** group (if applicable):

Mailing address:

Telephone: _____

Fax: _____

Email: _____

Web: _____

Years consulting full-time: _____

Years consulting part-time: _____

Years of professional experience: _____

Languages spoken: _____

Professional affiliations: _____

Size of organizations with which you prefer to work: (check as many as appropriate)

Very small

Small

Mid-size

Large

Rates: Hourly: _____ Daily: _____

How many employees are part of your firm full-time*: _____

Employees part-time*: _____

How many associates are affiliated with your group*: _____

(*if applicable please attach a list of employees and/ or associates and their areas of expertise)

Please submit the following with your application:

Resume

Three project references(for NOSSTIA use only)

Reference as a trainer if applicable

Consulting Specialty:

Please briefly describe your consulting specialty. (Please use additional sheets if necessary)

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ARES OF SPECIALIZATION

In order to be able to more accurately match your individual or firm’s skills with the our demand, we ask that you mark the appropriate boxes in the following three sections.

SECTION I- CONSULTANT SPECIALITY RANKING

Please rank up to five specialties in which you wish to be registered. Rank the specialties from 1-5 (1 being the highest) that would most consistently be identified with you or your practice. This will allow us to tailor our list of referrals to each organization’s particular needs.

- | | |
|---|--|
| <input type="checkbox"/> Board Governance/ Development | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Business plan Development | <input type="checkbox"/> Management Services |
| <input type="checkbox"/> Communications/ Marketing | <input type="checkbox"/> Merger Assistance |
| <input type="checkbox"/> Computer Information Systems | <input type="checkbox"/> Organization Development |
| <input type="checkbox"/> Diversity Planning/ Implementation | <input type="checkbox"/> Organizational Management |
| <input type="checkbox"/> Facilitation | <input type="checkbox"/> Program Planning and Evaluation |
| <input type="checkbox"/> Facility Issues | <input type="checkbox"/> Start-Up |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Fundraising*/Development | <input type="checkbox"/> Training |
| <input type="checkbox"/> Governmental Relations | <input type="checkbox"/> Other: _____ |

SECTION II- TYPES OF ORGANIZATIONS WITH WHICH YOU HAVE WORKED

- | | |
|--|---|
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Health Care |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Higher Education |
| <input type="checkbox"/> Arts and Culture | <input type="checkbox"/> HIV/ AIDS |
| <input type="checkbox"/> City & State Government | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Community Development | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Community Organizing | <input type="checkbox"/> International Affaires |
| <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> Internship Services |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Legal Services |

- Education
- Employment and training
- Environmental
- Faith-based Groups
- Family Planning
- Family Services/ Adoption/Foster Care
- Food/Hunger Relief
- Foundations/ Grant makers
- Other: _____

- Mental Health
- Multi- Service Center
- Professional Associations
- Public Health
- Public Agencies
- Social Justice/ Advocacy
- Social Services/ Human Services
- Start-Ups
- Substance Abuse/ Prevention
- Technical Assistance

SECTION III- FULL RANGE OF CONSULTING SERVICES

Please Check services you offer, regardless of which specialties you checked in Section-I: This will allow us to cast a wide net when the need arises, and will allow us to match a particular service to the needs of an organization.

Board Governance/ Development

- Board Assessment
- Board Development
- Board Recruitment
- Board/ Staff Relation
- Board Training
- Constituency Development
- Committee Structure
- Other: _____

Financial Management

- Accounting
- Auditing
- Banking
- Budgeting
- Financial Analysis and Planning
- Financial Mgmt. Computer System
- Financial Training
- Other: _____

Business Plan Development

- Business Models
- Plan Development
- Plan Implementation
- Other: _____

Fundraising/ Development

- Annual Appeal
- Capacity Building
- Commercial
- Fundraising Council
- Fundraising Strategies
- Grant Writing- Private
- Grant writing- Public
- Individual Donor Appeal
- Membership Development
- Planned Giving
- Professional Solicitor
- Special Events
- Other: _____

Communication/ Marketing

- Advertising
- Direct Mail Campaigns
- Event planning
- General Public Relation
- Media Relations
- Member/Volunteer Development
- Publications- Brochures, Newsletters & Annual Reports
- Others: _____

Diversity Planning/ Implementation

- Assessments
- Board Development
- Constituency Development

Computer Information Systems

- Assessment

- ↳ Implementation
- ↳ Programming
- ↳ Software Support
- ↳ Systems Planning
- ↳ Training
- ↳ Web Page Development
- ↳ Other:_____

↳ Training
Other:_____

Governmental Relation

- Advocacy
- Contract Management/Bidding Process
- Lobbying
- Public Policy Strategy
- Other:_____

Human Resources

- Compensation/ Benefits
- Conflict Resolution
- Dealing with Difficult Employees
- Hiring/ Termination
- Personnel Policies
- Position Descriptions/Appraisals
- Other:_____

Management Services/ Back Office Work

- Employee Benefit Programs
- Insurance
- Interim Management
- Investment Management
- Legal
- Payroll Systems
- Property Management
- Other:_____

Merger Assistance

- Due Diligence
- Facilitation
- Implementation/ Evaluation
- Mediation / Negotiation
- Planning/ Policy Integration
- Other:_____

Organizational Development

- Mission Review and Development
- Organizational Assessment
- Organizational Planning and Structure
- Professional Development Assessment
- Staffing Patterns and Structure
- Other:_____

Organization Management

- Communications and Decision Making
- Executive Coaching
- Executive Search
- Interim Directorship
- Managing Change and Growth
- Senior Management/ Staff Coaching
- Stress Management
- Team Building
- Volunteer Management
- Other:_____

Program Planning and Evaluation

- Evaluation and Outcome Measurement
- Feasibility Studies
- Needs Assessments
- Program Analysis
- Program Development
- Survey research
- Other:_____

Strategic Planning

- Business plan Development
- Collaborations/ Alliances
- Constituency Development
- Group Facilitation
- Strategic Plan Development
- Strategic Plan Implementation
- Vision Planning
- Other:_____

Training

- Design/ Provide Training program
- Provide Leadership Training
- Public Speaking and Presentations

Please indicate topic(s) on following page →

SECTION IV- TRAINING/ WORKSHOPS

Please complete only if you offer training or workshops.

NONPROFIT TRAINING TOPIC(S) YOU OFFER

What training/ workshop do you offer?	Number of times offered
1- _____ _____	# _____ _____
2- _____ _____	# _____ _____
3- _____ _____	# _____ _____
4- _____ _____	# _____ _____

STRUCTURE OF TRAINING WORKSHOP

What is the typical duration of your training/ workshop?

What is your fee by the hour, day, or session for your training/ workshop?

\$ _____

What is the maximum preferred number of participants?

What is the minimum preferred number of participants?

Please include a reference for each training/ workshop you listed.

Thank you.