Nonprofit Partner & Community Space Repair Application

Who is Rebuilding Together San Francisco (RTSF)?
Rebuilding Together is a nonprofit organization that provides home repair services to income qualified homeowners and tenants. RTSF also repairs / renovates community spaces and nonprofit partner spaces, like childcare, youth and senior centers, schools, homeless shelters, public parks, faith based organizations – so that they may better serve neighbors across San Francisco.¹

There is no charge for the repair services completed by Rebuilding Together. If you have further questions or need assistance in completing this application, please call our office at (415) 905-1611 x 206.

Volunteers with RTSF work under the direction of individuals skilled in the building trades to make building improvements that help the community agencies function more efficiently, as well as help them to motivate and retain staff, volunteers, and clients.

How do I apply for Rebuilding Together SF’s services?
Applications are accepted year round. Please send the completed application along with a copy of your tax status documentation and program / agency flyer.

Mailing Address
Rebuilding Together SF
Pier 28, The Embarcadero
San Francisco, CA 94105

Fax 415.905.1610

Email info@rebuildingtogethersf.org

Within two weeks of our receipt of your application we will outline next steps, which will likely include a phone consultation, and a follow-up visit to your community space by an RTSF representative.

¹ We can provide services to religious facilities only where social services are provided on a secular basis and on the premises, such as homeless shelters, nutrition and food pantries for income qualified neighbors, after school programming centers. If you need further clarification, please call our office.
SECTION 1. NONPROFIT PARTNER or COMMUNITY SPACE INFORMATION

Name of Agency / “Organization”: ________________________________

Address of Site: _____________________________ Zip Code: ______ Neighborhood: ______________________

Mailing Address _____________________________ City: _________________ Zip Code: __________
(If different from Site Address)

Your Name: _____________________________ Position: _____________________________

Email: _____________________________ Phone: _____________________________

Alternate Contact Name: _____________________________ Position: _____________________________

Email: _____________________________ Phone: _____________________________

Organization Type (circle one): Public, Private, Governmental, Community Green Space, or Faith Based?
Please attach your organization’s tax status to this application.

SECTION 2. AGENCY INFORMATION

What year was your agency founded? _______ What is your annual budget? ______________

What are your major funding sources? _____________________________

How many individuals do you serve annually? ______________

Website: www.______________________________ Social Media: ☐ Twitter ☐ Instagram ☐ FB

Please provide the organization’s mission statement:
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

Please attach any relevant brochures or handouts for your organization

Does your agency own the building? _______ If not, what is the length of the lease? ____________

Name of the building owner: _____________________________

Email: _____________________________ Phone: _____________________________

How does this space serve the agency’s participants? ______________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
SECTION 3. PROJECT SITE QUESTIONNAIRE

What are the improvements that your organization would like done? Please list improvements in order of importance; this will help RTSF get an idea of your proposed project.

Brief Work Description: ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

How will the proposed improvements impact your program? ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

What resources, if any, can the organization provide to aid in the project (funds, materials, skilled volunteers, etc.)? ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

For each question please answer YES or NO.  YES  NO

Can the community space accommodate 50+ volunteers on a one-day project?  □  □  If NO, about how many people? _____

Can the community space provide volunteers coffee and a snack and/or lunch?  □  □

Can your community space be closed for renovation on Rebuilding Day?  □  □

Can your participants/staff (or past recipients) be involved in the renovation?  □  □

Would your staff have any concerns if the project spanned more than one day?  □  □

Does the contact person on this application have decision-making authority?  □  □

Please include any other comments you wish to make here: ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

Where did you hear about Rebuilding Together?

By signing on behalf of the “organization”, I certify that the following statements in this application are true to the best of my knowledge. I understand the eligibility requirements and follow up documentation required to receive services. I understand that neither RTSF, nor any of its volunteers, will be held liable for work not completed to the recipient’s satisfaction. I hereby waive any right or cause of action arising as a result of our participation in RTSF programs from which any liability may or could accrue against RTSF or its officers, directors, employees, assigns, and/or successors in interest, collectively or individually.

Signature of Applicant _______________________________ Date ____________________________

Community Space & Nonprofit Partner Repair Application, 2018