

Partner Organizations and Service Contractors



IMPACT Community Action is conducting a Community Needs Assessment to help IMPACT and our partners better understand the needs and resources in our community. As part of the survey, we are interviewing key stakeholders in the community.

Date ___/___/___ City: _____ Zip Code: _____

- Consultant Monetary Contract or Service Agreement Non-Monetary Service Agreement/MOU Funder
 Other: _____

Anti-Poverty Organization: Yes No Target Population: _____

Name of Partner/Potential: _____

Scope of Service Contract/Partnership: _____

Please check the appropriate box to identify the category for this partner

- | | | |
|--|---|--|
| <input type="checkbox"/> Non-Profit | <input type="checkbox"/> Consortia/Collaborations | <input type="checkbox"/> For-Profit Business or Corp. |
| <input type="checkbox"/> Faith Based | <input type="checkbox"/> State Government | <input type="checkbox"/> School Districts |
| <input type="checkbox"/> Local Government | <input type="checkbox"/> Federal Government | <input type="checkbox"/> Housing Consortia/Collaborations |
| <input type="checkbox"/> Health Service Institutions | <input type="checkbox"/> Financial Banking Institutions | <input type="checkbox"/> Post-Secondary Education/Training |
| | | <input type="checkbox"/> State-wide Associations or Collaborations |
| | | Other: _____ |

- How long have you had a relationship with IMPACT?
 No existing relationship 1- 6 months 7 – 12 months 12 – 24months Longer than 24-months
- Is this relationship meeting the organizations’ needs? If not, please explain why not.
 Yes No Somewhat N/A
- What can IMPACT do to improve its existing activities, programs or services?
- Please identify any programs or service areas you believe are needed in the general community, but are not currently available.
- In your opinion, can you think of any new opportunities to expand this current relationship?
- Do you have any specific recommendations to address issues effecting the Elderly? Youth? Low-Income Individuals and Families? Working Poor? Middle Income Individuals and Families?
- What do you see as the three greatest areas impacting your community?
1. _____ 2. _____ 3. _____

thank you!

Contact Details:
Name: _____
Phone# () _____ - _____ Fax# () _____ - _____
Website: _____