



PROJECT SUBMISSION FORM

Please provide the information requested and your proposal will be considered for adoption by the next Leadership class. Incomplete proposals or proposals that lack clarity will not be considered. PLEASE PRINT LEGIBLY

Company Name: _____

Address: _____

City: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

E-mail Address of Specific Contact: _____

Project Name: _____

Project Location/Address: _____

Project Zip Code: _____

What is the mission or objective of this project? Please be specific

Please use complete sentences to provide a brief description of the service(s) you are requesting the Torchbearers class members to perform:

In your opinion, are six to eight people capable of implementing this project over the next five to six months?

Who will be the primary authority and contact for the project? _____

Who will oversee the project and who will assist the Torchbearers in staying on schedule (if different from the person listed above)? _____

Will the contact be on or off location during the implementation of this project?: ON OFF

Who has the authority and can be contacted for questions about the proposal? Please provide name, number, phone number, and e-mail address:

What is your best estimation of the amount of time per week that will be required to complete this project?

Please provide specifications for this project. If project specifications are extensive or detailed, please add an additional page.

To assist the Torchbearers in the execution of this project, please provide a description of what you feel will be the milestones required for executing the project and their corresponding due dates. If additional milestones will be required, please add an additional page, along with due dates:

Milestone: _____

Due Date: _____

Who will be specifically served by this project? _____

Approximately how many people will benefit? _____

If funding will be required to implement this project, what will be the approximate cost?

How much of the cost will be contributed by the organization? _____

How much of the cost (if any) must be raised by the Torchbearer Class Members? _____

For what specific part of the project will these funds be needed?

Once this project is completed, will the organization be able to maintain the project without the assistance of additional volunteers? Please explain:

Submit to:

naomi.kemp@leadershipmontgomery.org

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