Nonprofit Mission Award for Advocacy

Nomination Questions

1. Name of the nominated organization (include full name of the Minnesota nonprofit being nominated).
2. Is the nominee a coalition?
   a. If so, please provide a list of all major coalition partners.
   b. Please designate a lead organization for the purposes of this award.
   c. Provide lead organization contact person (name, address, phone, email).
3. If not a coalition, who is the primary contact person at the organization for the purposes of this nomination (name, address, phone, email, website)?
4. What is your affiliation or relationship to the nominated organization (name, email, phone, organization affiliation, address, city/state/ZIP)?
5. In 200 words or fewer, please briefly describe the organization’s or coalitions program, mission and goals. Please include information about geographic area served and size of constituency.
6. In 400 words or fewer, please describe the nominated effort and why the nominated organization meets the criteria for the Nonprofit Mission Award for Advocacy.
7. If this advocacy work involved other collaborators, please give examples of your work together in 200 words or fewer.
8. In 400 words or fewer, please describe the impact of the organization’s or coalition’s work on behalf of its constituency and/or Minnesota communities and any other outcomes resulting from the nominated effort.