Lakefront Career Network

2018 LCN Spotlight Organization Application

The Lakefront Career Network (LCN) is the young professionals group for the Michigan City Chamber of Commerce (MCCC). Each year the LCN chooses one community organization to spotlight for the year through a unique partnership. In this partnership, the LCN can help you get the word out about your mission and bring volunteers to your doorstep. Our hope is that by connecting to a mission that resonates, LCN volunteers can connect with other great people and make a huge difference in our community.

We are very proud of the partnerships we have in the Michigan City community. Because we care very much about the impact we are able to bring to both the community and the organization, we need to be selective in the partnerships we build.

In order to be considered as the 2018 LCN Spotlight Organization, you must meet the following criteria:

- Be a registered 501c3 organization
- Have been established for at least 5 years
- An organization with a strong local presence in Michigan City
- Be willing to work with LCN Committee to coordinate involvement
- Ability to cross promote within networks
- Have an active need that can benefit from this year long partnership

A partnership with LCN can include:

- A feature on LCN’s website
- Social media promotion through LCN’s channels and MCCC’s channels
- Invitation to speak on behalf of your organization at LCN Meet Ups
- One LCN Fundraising event to benefit your organization
- One LCN coordinated volunteer opportunity on “Day of Giving” for your organization

Please complete the attached application for consideration. Email completed application to lakefrontcareernetwork@gmail.com by the deadline listed below.

Timeline:

- August 2, 2017 Application opens for submission
- October 14, 2017 Application deadline
- November 17, 2017 LCN Executive Committee makes selection
- December 1, 2017 MCCC Board of Directors gives final approval
- December 3, 2017 Spotlight Organization & LCN sign agreement
- December 7, 2017 Holiday Mixer- Announcement Made Public
Spotlight Organization Application

Organization Name: _____________________________________________________________

Address: ______________________________________________________________________

Website: _____________________________ Phone Number: ___________________________

Contact Name: ________________________ Contact Title: _____________________________

Contact Number: ________________________ Contact Email: _____________________________

Number of Years in Operation: _______ Registered Non Profit: Yes/No

Mission Statement: _____________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Number of Paid Staff: _________________ Number of Active Volunteers: _________________

Organization’s Budget 2017: ____________ Organization’s Projected Annual Budget 2018: ____________

Have you read the Spotlight Organization selection criteria: Yes/No

Detail the overall need for the organization in 2018 and how you believe this partnership can assist. Be sure to include any specific one time volunteer needs, one time financial/donation request, or a specific event that this partnership may benefit. Describe the need for a “Day of Giving” activity. Use additional sheets if needed.
_________________________________________________________________________________________
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By signing, I acknowledge that the information provided is truthful.

Organization Contact Signature: _________________________ Date: _________________________________