



Dear Prospective Partner,

At Care and Share Food Bank, we believe that no one should go hungry. Every day, we provide food to our partner agencies across Southern Colorado to serve our neighbors in need because well-fed communities are better for us all. We are thrilled that you are interested in joining us to feed the hungry in our community.

Enclosed is an application packet that will guide you through the steps necessary to become a partner agency. I encourage you to read through the first couple pages of the application packet carefully to help you determine if your organization meets the requirements to become a partner agency.

Once we've received your application packet and reviewed it, I will contact you to discuss the next steps. Please note that submitting an application does not guarantee that you become a partner agency. We will consider your location, hours of service, and any activities unique to your program and how it will complement services provided by our existing partners.

Please feel free to contact me with any questions that you may have. We look forward to working with you in the future.

Sincerely,

Stasia Erickson  
Agency Relations Director  
Care and Share Food Bank for Southern Colorado  
2605 Preamble Point  
Colorado Springs, CO 80915  
[Stasia@CareandShare.org](mailto:Stasia@CareandShare.org)  
719.418.4299

# ABOUT CARE AND SHARE FOOD BANK

## **VISION:**

Our vision is a hunger-free Southern Colorado.

## **MISSION:**

Our mission is to provide food, partnering opportunities, and education to fight hunger and food insecurity in Southern Colorado communities.

## **PURPOSE:**

Our core purpose is to bridge the gap between hunger and abundance.

## **WHAT WE DO:**

At Care and Share Food Bank, we believe that no one should go hungry. Every day, we provide food to our partner agencies across Southern Colorado to serve our neighbors in need because well-fed communities are better for us all.

Care and Share exists to ensure that the one in seven Southern Coloradoans at risk of hunger have access to enough healthy and nutritious food to thrive. We know that children without adequate access to food cannot develop successfully, families cannot plan for their future, and seniors find it more difficult to remain independent.

Through our partner agencies, like soup kitchens, shelters, food pantries and senior centers across 31 Southern Colorado counties, we are able to reach 143,000 of the 161,000 people who are food insecure. Food insecurity, the inability to consistently access nutritious and adequate amounts of food necessary for a healthy life, can happen to anyone.

Last year, we distributed more than 23 million pounds of food throughout our service area, which equates to more than 19 million meals.

Our food comes in from a variety of sources. We partner with local farmers, retailers, and grocers to pick up perishable products daily. We also partner nationally with Feeding America, the nation's largest domestic hunger relief charity, to secure truckloads of donated product.

Due to our buying power and efficiencies in procuring food, for every dollar donated to Care and Share, 96 cents goes directly to food distribution programs. Furthermore, for every dollar donated, we are able to procure 10 pounds of food, which is the equivalent of 8 meals.

# PRE-APPLICATION CHECKLIST

Care and Share Food Bank partner agencies are 501(c)3 non-profit organizations or churches that are incorporated for the purpose of serving the ill, needy, or infants (minor children), provide direct service to the hungry, and do not redistribute product to any other entity. The pre-application checklist indicates our minimum requirements. If you do not or cannot meet these requirements, you will not be considered a candidate for membership as a partner agency.

In addition to these minimum requirements, your agency will be reviewed on the number of households and clients you do and can serve, whether there is any network duplication in your service area, and/or whether your service area is an underserved area or serves an underserved population.

In some cases, Care and Share Food Bank may be able to work with an applying agency to meet a requirement they have not fulfilled. *Can you demonstrate:*

- Organization is a 501(c)3 non-profit organization or a church located in Care and Share Food Bank's 31 county service area
- Food Program has been in operation a minimum of 90 days
- Care and Share product will only be utilized as related to agency's purpose of serving the ill, needy or minor children, and will not be used within the agency or to feed staff or volunteers
- Facility includes secure and adequate physical storage/preparation/distribution space that is not located in a personal residence
- Operate regularly scheduled hours and are open at least twice a month for a minimum of 90 minutes each time
- Have staff/volunteers who are accountable for record keeping, inventory control, and a system for keeping track of individuals served
- Have the ability and willingness to access and submit information via the internet on a monthly basis
- Willing to adhere to food safety guidelines and to complete food safety training
- Ensure clients receive food free of charge with absolutely no conditions levied, implied, or exchanged
- Pass a site inspection prior to membership and allow for appropriate on-going monitoring by Care and Share Food Bank representatives
- Agree to use Care and Share Food Bank at least once every six months
- Provide sufficient funding sources to cover expenses

## BENEFITS OF PARTNERSHIP

Becoming a Partner Agency of Care and Share Food Bank offers many benefits:

- We are a partner to help you accomplish your mission of feeding the hungry
- We offer a wide variety of food and household products in one place
- You can use free pick-up or low cost delivery (outside El Paso & Pueblo Counties)
- You can easily order product online
- Lower cost to you; receive product for a small shared maintenance fee
- You are a member of a network helping reduce hunger in Southern Colorado
- You help us distribute more food to more people. We need you!

## SITE VISITS

Care and Share Food Bank and Feeding America require that before an agency can be approved for partnership, it must pass a site inspection. A site will be re-inspected after their first three months in operation and then the site will be inspected every other year.

### WHAT DO WE LOOK FOR IN A SITE VISIT?

- Clean storage areas and consistent use of a pest log
- Food and non-food household items are stored in separate areas
- All food is stored 4 inches off the floor, and 2 inches from the wall
- Food rotation practice of “First In, First Out” for food distribution
- A working thermometer in all Refrigerator and Freezer units, and dry storage areas, with consistent use of temperature logs  
*(32°F – 40°F degrees for a refrigerator and 0°F (zero) degrees and below for freezer)*
- At least one certified Safe Food Handler
- Use sign in sheets, or other method to record the number of clients served
- Ability to determine if 50% or more of clients are ill, needy, or minor children

## DOCUMENTS TO ATTACH TO APPLICATION

The following is a checklist to determine whether you should proceed with the application process. You should be able to check all of the boxes below.

- \$40 Non-refundable application fee paid with a check from the 501(3) (3) non-profit/church or sponsoring organization, made payable to Care and Share Food Bank.
  
- Application for Partnership
- Agency Agreement
  
- Grievance Policy
- Partner Agency Account Policy
  
- Copy of IRS/US Dept. of Treasury letter of Determinations *(which states your 501(c)(3) tax exempt status)*
- Articles of Incorporation
- List of Board of Directors/ Governing Board
- Letter of Affiliation, if your agency is sponsored by a 501(c)(3) organization or church
  
- Health Department Inspection Report if you are a meal site.

- IF YOU ARE A CHURCH SUBMIT EITHER**  
Copy of IRS/US Dept. of Treasury letter of Determination or a letter from denominational headquarters stating that the church applying for partnership is a church in good standing in the denomination and has not been denied 501(c)(3) status,

**OR:**

- Complete the attached 14-point IRS Church Qualifier Form, and
- Letter of confirmation on church letterhead, as per attached example

# APPLICATION FOR PARTNERSHIP

## AGENCY INFORMATION

Agency Name - 501 (c)(3):

Program Name *(if different)*

Billing Address

Physical Address

City/State, Zip, County

Phone:

Website

## CONTACT INFORMATION

Contact Person:

Title/Role with Agency:

Email:

Phone:

Agency Director/ Pastor:

Email:

Phone:

## HOURS OF OPERATION (please include hours of service if different)

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Do you have any requirements for individuals who use your services (i.e. must live in X County or zip code or be of a certain age?)

## PROGRAM INFORMATION

Type of Agency:  Pantry  Meal Provider

Does your agency have non-profit status?  YES  NO

Federal IRS Tax Exempt Number 501(c)3

*Please attach a copy of your IRS Tax Exempt Designation Letter*

Date program was established:

Is your agency licensed by the state to serve a specific number of clients? Please explain

## SERVICES

Please describe the type of services provided by your agency/program. Please include all services, even those that are not food related

Please explain how food from Care and Share Food Bank will be utilized:

Does your agency provide meals on your premises?  YES  NO

If YES, how often?  Daily  Weekly  Monthly  Other

Number of people served at each meal:

Breakfast \_\_\_\_\_ Lunch \_\_\_\_\_ Dinner \_\_\_\_\_ Snacks

Does your agency provide home delivered meals?  YES  NO

Does your agency distribute food for emergency assistance to individuals or families? YES NO

If yes, what types of food are distributed?

Canned Goods  Dry Goods (cereal, pasta, etc)  Perishables (dairy, produce etc)  
 Meat (fresh, frozen)  Frozen Goods

What is the average number of individuals served each month?

What is the average number of families served each month?

How many days of food for each person do you provide?

How many individuals and/or families would you like to serve each month?

What percentage of your clients are low income?

Do you require proof of need?

## FOOD STORAGE

What type of storage space do you have available?

Do you have any other storage locations?

Refrigeration: # of units :

Freezer # of units:

## FUNDING

Do you charge your clients for services offered?  YES  NO

If YES, please explain:

Is your organization reimbursed by local or federal government for services for client care?

YES  NO

Per client reimbursement:

Per client actual cost:

Do the people receiving food from your organization pay money or contribute any property or service for the food?  YES  NO If so, explain:

## AUTHORIZED SIGNATURE

By signing below, you confirm that the information provided is true and accurate,

Contact Name:

Signature:

Agency Director/ Pastor:

Date:

***Submission of an application does not guarantee a partnership.  
Care and Share Food Bank reserves the right to accept partners that best fit Care and Share  
Food Banks geographic and programmatic need.***





## PARTNER AGENCY ACCOUNT POLICY

Our **Agency Agreement**, signed by the Agency Relations Director when the Care and Share account is opened, states that the agency agrees to pay all account balances within 30 days of the invoice date. In order to help all of our partner agencies assist the most people, we must insist on compliance with this policy.

When an agency's balance reaches the 30-day old mark, a friendly reminder is sent to help you keep your account current. All payment invoices have payment terms of Net 30 which means they should be paid within 30 days of receipt.

If the unpaid account balance reaches the 30 to 59-day-old mark, agencies will be blocked. Blocked means that the agency is not able to receive any food from Care and Share until an agency representative responds with a payment date. After payment is made, the agency may return to the regular billing process as long as the account remains current each month.

If an unpaid balance reaches the 60-day-old mark, agencies are made inactive and may be terminated unless the account is brought current immediately.

All new agency accounts are put on probationary status for prompt and full payment for three months to establish a payment history.

\_\_\_\_\_  
(Signature) Executive Director or Pastor

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)



## GRIEVANCE POLICY AND PROCEDURES

### Grievances against Care and Share Partner Agencies:

1. Care and Share Food Bank must respond to complaints by the public about any Care and Share Partner Agencies.
2. The Agency Relations Director will notify the Agency by telephone of the specific complaint received.
3. The phone conversation will be followed by a letter or a visit to the Agency by the Care and Share representative.
4. In the case of a complaint of a serious nature Care and Share staff may arrive unannounced at a site to establish the validity of the complaint.
5. The results of any investigation and subsequent recommendations will be documented in the Agency's file. The Agency will be notified in writing of the conclusions and any actions to be taken.

### Grievances against Care and Share Food Bank:

1. A Partner Agency may submit a written statement of grievance addressed to the Agency Relations Director. The statement must include the reasons for the grievance, pertinent facts, and what the Agency believes would be an acceptable solution to the problem.
2. The Agency Relations Director, following study and recommendation from the Care and Share staff, will determine the plan of action and decision on the grievance within ten working days of receiving the grievance letter. The Agency will be notified in writing of the decision.
3. The Partner Agency may appeal the decision to the Care and Share President/CEO. The decision of the President/CEO is final.
4. An Agency will not be discriminated against, harassed or suffer any reprisals by Care and Share Food bank as a result of filing a grievance.

---

(Signature) Executive Director, Pastor, Etc.

---

(Date)

---

(Print Name)

**Sample Affiliation Letter from Sponsoring Organization  
on Organization Letterhead**

Care and Share Food Bank  
2605 Preamble Point  
Colorado Springs, CO 80915

Date

Re: Letter of Affiliation

This letter is to affirm that **[ABC organization/church]** operates as a 501(c)(3) not-for-profit organization and is the direct sponsor of **[XYZ Food Pantry/Feeding Site]**. **[XYZ Food Pantry/Feeding Site]** is in good standing with our organization and their food program feeds the ill, needy or infants.

**[ABC organization/church]** will be fiscally, programmatically and legally responsible for oversight of **[XYZ Food Pantry/Feeding Site]**.

Attached is a copy of our IRS/US Dept. of Treasury letter of Determination.

**If the Sponsor is a Church:**

- Copy of IRS/US Dept. of Treasury letter of Determination or a letter from denominational headquarters stating that the church applying for partnership is a church in good standing in the denomination and has not been denied 501(c)(3) status,

Or:

- Complete the attached 14-point IRS Church Qualifier Form, and
- Letter of confirmation on church letterhead, as per attached example

Sincerely,

Jane/John Doe  
Sponsoring Agency Executive Director or Pastor, Etc

## IRS CHURCH QUALIFIER FORM

The Internal Revenue Service uses 14 characteristics to determine whether an organization qualifies as a church.

All applicants applying as a church should provide a letter from the church on its letterhead. It should be signed by its chief executive officer affirming that the organization is, in fact, a church and essentially meets the spirit of the 14 criteria employed by the IRS in defining a church.

**Please attach examples that demonstrate the 14 point criteria. Demonstration of 10 criteria is required, the first 6 are mandatory.**

| MANDATORY CRITERIA   | POSSIBLE SOURCES FOR DOCUMENTATION  | DOCUMENTATION ATTACHED   |
|--|---|--------------------------|
| A distinct legal existence   | Letter from IRS showing Employer ID number  | <input type="checkbox"/> |
| A recognized creed and form of worship   | Articles of Incorporation, By Laws, Church Bulletin   | <input type="checkbox"/> |
| A definite and distinct ecclesiastical government                                | Articles of Incorporation, By Laws, or Constitution   | <input type="checkbox"/> |
| Established places of worship  | Church bulletin, Newsletter   | <input type="checkbox"/> |
| Regular congregations  | Church bulletin, Newsletter   | <input type="checkbox"/> |
| Regular religious services   | Church bulletin, Newsletter   | <input type="checkbox"/> |
| SELECTED CRITERIA (choose 4)   | POSSIBLE SOURCES FOR DOCUMENTATION  | DOCUMENTATION ATTACHED   |
| A formal code of doctrine and discipline   | Articles of Incorporation, By Laws  | <input type="checkbox"/> |
| A membership not associated with any other church or denomination                | Statement of mission, objectives and goals of the church signed by the pastor and three others        | <input type="checkbox"/> |
| A distinct religious history   | A brief written history   | <input type="checkbox"/> |
| A complete organization of ordained ministers ministering to their congregations | Church bulletin or other published document listing the ministers or copy of ordination certificates. | <input type="checkbox"/> |
| Ordained ministers elected after completing prescribed courses of study          | Copy of Ordination and diploma  | <input type="checkbox"/> |
| A literature of its own  | Newsletter or Sunday morning program  | <input type="checkbox"/> |
| Sunday schools for religious instruction of the young                            | Church bulletin, Newsletter   | <input type="checkbox"/> |
| Schools for the preparation of its ministers                                     | Copy of diploma from a school of divinity   | <input type="checkbox"/> |

As a duly authorized officer of \_\_\_\_\_ (church name), I certify that this organization meets the requirements indicated for identification as a church and has not applied to the IRS for 501(c)(3) status and been denied, or has not had its 501(c)(3) status revoked by the IRS.

\_\_\_\_\_  
(Signature) Executive Director, Pastor, Etc.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)

**Sample Confirmation Letter on Church Letterhead  
to accompany 14-Pt. Checklist**

Potential Agency Ministries  
222 East Street  
Colorado Springs, CO 80909

Date

Dear Care and Share Food Bank:

I, Jane/John Doe, am the Pastor and Chief Executive Officer of *Potential Agency Ministries*. I am writing to affirm that *Potential Agency Ministries* is in fact a church, defined by the IRS as a 501(c)(3) equivalent (Pub. 557). Furthermore, *Potential Agency Ministries* complies with the spirit of the 14-point criteria employed by the IRS in defining a Church.

*Potential Agency Ministries* is incorporated under the laws of the State of Colorado as a non-profit organization. Our articles of incorporation (copy attached) list our creed and form of worship. We are non-denominational and not affiliated with any other denomination and we have a distinct ecclesiastical form of government. We have met as a church continuously for the past 5 years, conducting regular worship and instruction at a regular place of worship. We have various Sunday school classes and our pastor is an ordained minister.

Sincerely,

Jane/John Doe  
Executive Director, Pastor, Etc.

enclosures:   Articles of Incorporation  
                  Copy of Pastor's Certificates of Ordination  
                  Bylaws  
                  Brochure\Informative Documents