COMMUNITY INVESTMENT VOLUNTEER

Community Investment volunteers recommend to the United Way Board of Directors how to best distribute the money raised in the annual campaign to advance the common good in the areas of Education, Income and Health. The total time commitment for Community Investment volunteers is approximately 10-20 hours over the course of a year.

Responsibilities:
Each volunteer is assigned to a vision council – Education, Income or Health. The vision councils will meet quarterly to learn about community issues, review data, and view solutions at a system-wide level. They will engage in frank and candid discussions about community issues and solutions, and review year-end reports of funded programs. Every other year, during the community investment process, panels will conduct agency reviews, using our online process as applicable. Together with the other members of the panel, the volunteer will:

1. Evaluate the effectiveness of agency program services in meeting community needs, based upon community impact and outcome measurement;
2. Review the financial requirements of the agencies to meet those needs;
3. Recommend an annual level of financial support for each program.

Qualifications:
1. Be a financial contributor to United Way of the Lakeshore, even on a minimal level. (The Board of Directors believes that because it is the responsibility of community investment volunteers to invest contributions, those making this decision should also be contributors.)
2. Have an interest in the needs of the community.
3. Be willing to make a commitment to complete and participate in the entire review process (i.e. make every review meeting).
4. Be willing to disclose any current involvement with a United Way certified agency in order to be placed on an appropriate panel.
5. Be comfortable with computers and navigate United Way’s online system as applicable (training provided).

Duties:
1. Approach the fund distribution / investment process as a collaborative, community-building effort.
2. Attend a United Way orientation/training session.
3. Participate in generating a list of questions for the agencies.
4. Visit agencies with team to address the team questions and concerns (approximately four hours).
5. Make notes after each visit to capture immediate impressions.
6. Participate in the final discussion to determine the funding recommendation for the programs of each agency.
7. Make recommendations on investment levels to Lakeshore Impact Council, which brings recommendations to Board of Directors.
8. Return materials to United Way of the Lakeshore and evaluate your experience.
9. Ensure that agency materials and panel discussions are kept confidential.

Investments by County:
Monies raised in a particular county are invested in only that county by donor-volunteers from that respective county.
Biographical Data Sheet for Community Investment and Review Volunteer

Name: ___________________________________________ County: ___________________________
Title: ___________________________________________ United Way Donor: ___ yes ___no
Employer/Firm: ____________________________________________________________
Union Affiliation: ____________________________________________________________
Work Address: ________________________________________________________________
City and Zip Code: ____________________________________________________________
Work phone: ___________________________ fax: _____________________________
Work Email: _____________________________
Home Address: ________________________________________________________________
City and Zip Code: ____________________________________________________________
Home Phone: ___________________________ cell: _____________________________
Home Email: _____________________________
Contact preference: work ________ home ________

Please list current or past involvement with United Way (e.g. community investment volunteer, donor, campaign coordinator or committee member, loaned executive, board member, etc.):

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please list current or past involvement with any other local community organizations and any current or past board membership/affiliation with non-profit health and human service organizations:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please indicate your first, second and third choices on the areas in which you would like to serve:

• ___ Income (Long-term Self-Sufficiency: Job, Savings, Transportation, Childcare, Housing, Utilities)
• ___ Education (Building an Educated Workforce)
• ___ Health (Healthy & Safe Individuals and Families)

Please complete & return this form to be on the committee. Email wyneice@unitedwaylakeshore.org; fax (231-722-3137); or mail United Way of the Lakeshore, attn: Wyneice Hairston, PO Box 207, Muskegon MI 49443-0207.