

Eligibility Quiz

IMPORTANT INFORMATION BEFORE BEGINNING YOUR APPLICATION

NOTE: GOOGLE CHROME AND MICROSOFT EDGE ARE NOT COMPATIBLE WITH OUR ONLINE SYSTEM.

FIRST-TIME USERS

- If you ***have never used*** our online application process, after completing the eligibility quiz, create your account by clicking the Save and Finish Later button at the end of page one of the application.
*****Applications will not be saved unless an account is created.***
- After completing the eligibility quiz, a new application is now in your online account and the application is considered to be In-Progress.
- You will receive an email that your application was saved. Once saved, the pending application will be listed in your "In Progress" section of the Application tab.

RETURNING USERS

- If you ***have used*** our online application process, it is recommended you save the application once you have completed the eligibility quiz and are on page one of the application. (If you are a previous grantee, you do not have to create another account. You can use your existing login and password.)
- If you have forgotten your password, select "Forgot Password?". Enter your email address associated with this account. A temporary password will be emailed to that email address.
- After saving your application, you will receive an email that your application has been saved. Once saved, the pending application will be listed in your "In Progress" section of the Application tab.

COMPLETING THE APPLICATION

- When completing the application, for best results, please use Internet Explorer or Mozilla Firefox.
- **SAVE OFTEN.** You will receive a warning notification. If you do not save the application, after 20 minutes, any unsaved work will be lost.
- To access your saved application at other times, go to our website at <http://zsr.org/grantees> and click on "Access your online account".
- Only one person can be logged into the account at a time.
- Save your work frequently by clicking the "Save and Finish Later" button found at the bottom of each page. Please note that saving your application will also trigger an automated email reminder.
- Please do not use the back button on your browser; click the tabs across the top of the page of the application to take you back to a particular section of the application.
- Please do not use bullet points, tabs, or any other symbols or special characters (#, (), ", >, <, *). Our online system does not recognize them. Also, bold and underlined text formatting options will not be displayed within your answers.
- Click the red check mark to spell check your narrative.
- Upon reviewing your application, if *red* errors display, please correct the information, then click on the "Update" button at the bottom of the page. When all errors are resolved, the final attachment has been created and uploaded, and the "Update" button has been selected; you can submit your application. All questions and required information must be completed and uploaded. Please review your application carefully. ***AN INCOMPLETE APPLICATION COULD POSSIBLY NOT BE ACCEPTED.***
- Do not submit any information to sabbatical@zsr.org (unless directed by Foundation Staff). If you would like to submit any information that is not listed within the application, contact LaRita Bell first at the number provided below.
- Once you have submitted your application, you will receive an email confirmation from gloriap@zsr.org indicating your recent submission.
 - a. When your online account was created for your organization, make sure that the email address is a valid email address without spam blockers or bulk mail filter. All communications will be emailed to the email address that was used when the online account was created.
 - b. If that email address has changed or if you are unsure about the email address used, contact the Foundation at the number provided below.
 - c. If you do not receive confirmation of submission, check your spam mail or junk mail. If not there, you may not have

selected the Submit button. Log back into your account and look in the pending applications. If not submitted, open and resubmit the application.

- d. To ensure the email confirmations will not go to spam or junk mail, add gloriap@zsr.org to your email contacts.
- If other questions arise while working on this application, visit our website at www.zsr.org. If you cannot find the answer to your questions, call us at (800) 443-8319 or (336) 725-7541.

I have read the above information and understand the content.

-Select One-

Next

SAMPLE

[Contact Us](#)[FAQs](#)

Eligibility Quiz

Are you currently working in a paid, full-time, executive-level position in North Carolina? (Full-time is considered to be 35 hours or more per week)

-Select One-

SAMPLE

[Contact Us](#)[FAQs](#)

Eligibility Quiz

Are you currently employed by public school, college, university, governmental agency, hospital administrator, or full-time clergy?

-Select One-

SAMPLE

[Contact Us](#)[FAQs](#)

Eligibility Quiz

Have you served in your current position for at least three years, of which two years in a paid full-time, executive level position?

-Select One-

Next

SAMPLE

Eligibility Quiz

Currently, the Foundation awards up to five sabbaticals every other year. Three to six month sabbaticals offer individuals the opportunity to focus primarily on their personal needs and devote themselves to self-revitalization. The awarded compensation (\$30,000) and \$10,000 to each organization for planning and transition expenses, provides the financial support necessary for sabbatical recipients to temporarily leave their place of employment. Please note: Of the \$10,000, at least \$5,000 must go toward activities that will enhance the recipient's entire organization. For example, staff retreats, team-building exercises, mentoring opportunities, and/or other activities to support the staff.

Sabbatical recipients use this time to engage in non-professional development activities of their own choosing to aid in personal renewal and growth. While on hiatus, award recipients travel, study, read, reflect, rest, and/or explore interests unrelated to their field of work. It is the Foundation's hope that sabbatical recipients will return recommitted to the challenges and rewards of public service and thus prolong their tenure in the nonprofit sector.

The deadline for the Sabbatical Application submission is October 30, 2019 at 12:00 pm (NOON).

I am aware and understand.

-Select One-

Applicant Information

Printer Friendly Version | E-mail Draft

* Required before final submission

Applicant Information

Year for Which You are Requesting a Sabbatical
2020

Sabbatical Amount:
30000

* Have you previously applied for a Z. Smith Reynolds Foundation Sabbatical?

- Select One -

* Name

Please enter as "Smith, John W."

* First Name

Middle Name

* Last Name

* Title

(Example: Executive Director, etc.)

* E-mail

(Work email is preferred.)

Home Address

City

State

<None>

Zip Code

Home Phone Number

Format: 999-999-9999

Cell Phone

Format: 999-999-9999

* County in Which You Live

- Select One -

* Gender

- Select One -

* Age Group

- Select One -

* Race/Ethnicity

- Select One -

* Biographical Sketch/Resume

Provide a one to two page document

Organizational Information

Printer Friendly Version | E-mail Draft

* Required before final submission

Organizational Information

* Name of Organization with which you work

* Organization Mailing Address

* City

* State

* Zip Code

* Telephone Number

Format: 999-999-9999

Ext.

Fax Number

Format: 999-999-9999

* Region of State where your organization is located.

Organization's Physical Address

City

State

Zip Code

* Mission of Organization

Word count 0 of 80

* Number of Years in Nonprofit Work in North Carolina

* Number of Years With Organization

* Number of Years in Current Position

Save & Finish Later

Next

Other Information

Printer Friendly Version | E-mail Draft

* Required before final submission

Other Information

* Briefly describe your current responsibilities.

Text area for current responsibilities with a red checkmark icon to the right.

Word count 0 of 150

* How would your responsibilities be managed during your sabbatical period?

Text area for sabbatical management with a red checkmark icon to the right.

Word count 0 of 150

* What is your gross annual salary with this organization?

Text input field for gross annual salary.

* Endorsement Letter

Please upload an endorsement letter from a board member of your organization including:

- a. The plan for organizational management during your absence
- b. A statement about the particular need for you to receive a sabbatical

(Please Limit to 2 Pages)

Browse... button for file selection.

Upload button.

* Please List Any Special Recognition or Awards Received.

Text area for special recognition with a red checkmark icon to the right.

Word count 0 of 75

The person authorizing a sabbatical for an Executive Director must be a Board Chair. Either the Board Chair or an Executive Director can approve all other applicants.

Who has authorized your sabbatical release?

* Name

* Title

(Example: Board Chair, etc.)

* Telephone Number

Format: 999-999-9999

* Cell

Format: 999-999-9999

* Email

(Email of person authorizing sabbatical.)



* Sabbatical Narrative

Please attach a narrative of no more than 2-3 pages. **Make sure the four topics below are explained within the narrative.**

1. Why did you choose to work in the nonprofit sector?
2. Why do you need a sabbatical and how would you personally benefit from it?
3. What are some of the planned activities you hope to pursue during the sabbatical period?
4. How do you see yourself approaching your work differently after the sabbatical?

 Browse...

Upload

* Sabbatical Budget:

Include a proposed sabbatical budget not to exceed \$30,000. The budget should include items such as household expenses, travel, personal development expenses, and taxes.

 Browse...

Upload

References:

* References

Please upload a one-page document of three references. Include the names, addresses, work/cell number of the three individuals.

 Browse...

Upload

* Reference Letter

Include a letter from one of the above references describing a particular need for you to receive a sabbatical.

 Browse...

Upload

Additional Information

(Please limit any additional information to 1 page or less.)

 Browse...

Upload

Acknowledgement

Acknowledgement:

* I acknowledge the Sabbatical online application submission deadline is October 30, 2019 at 12:00 pm (NOON).

If selected, by submitting this application I agree that I will:

- a. be released from my organizational obligations during my sabbatical;
- b. complete a sabbatical for one continuous period of three to six months;
- c. begin the sabbatical before April of the year after selection;
- d. attend the pre-sabbatical and post-sabbatical retreats; and
- e. submit a two- to three-page typed final report describing and assessing my sabbatical experience, by one month after completion of the sabbatical.

*Failure to uphold this commitment may lead the Foundation to seek a refund of the reward.

* Please type your signature below which will serve as acknowledgement of your expected commitment if selected. 

Format: First Name, Middle Initial, Last Name

Save & Finish Later

Review & Submit