



**NONPROFIT SECTOR RESOURCE INSTITUTE**

**Student Community Assistance Program  
(SCAP)**

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_

Organization's Mission Statement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date by which work needs to be completed: \_\_\_\_\_

On a separate page:

1. Briefly describe the desired qualifications of the student or student team.
2. Please give a detailed description of the nature of the student assistance needed (i.e. needs assessment, marketing/public relations plans, fundraising/grant writing, strategic plans). Attach a second page if necessary.

**Please return by mail to:**  
Barkley Calkins, Director  
Nonprofit Sector Resource Institute/CPS  
Seton Hall University  
400 South Orange Ave.  
South Orange, NJ 07079

**Or by fax to:**  
(973) 313-6162

**Or send as an email attachment to:**  
calkinba@shu.edu