IS MY ORGANIZATION READY FOR AN AMERICORPS GRANT?

READINESS ASSESSMENT 2027

INTRODUCTION: This assessment is to assist you in determining if your organization is poised to apply, and hopefully, implement, an AmeriCorps grant. It should also assist you in getting your systems ready and preparing to submit a grant application for any type of funding.

This assessment is a general guide, a rough tool to help you plan for implementation of AmeriCorps and other complex grant-funded programming. Successful completion of the assessment does not guarantee AmeriCorps funding through the Serve New Mexico Commission or the Corporation for National and Community Service (CNCS).

Read each question carefully and answer honestly. **Please return your completed assessment along with the Notice to Intent to Apply to https://nmdws.bonfirehub.com/projects/256354/details no later than October 9, 2026 by 5:00pm MST.**

Special Note for Faith-Based Organizations seeking to operate government funded programs:

If the conditions below are not acceptable to your organization, government funding is probably not a good option:

- Participation in government funded programs must be open to all who qualify, without regard to religious beliefs.
- No participant in a government funded program may be required to participate in inherently religious activities.
- Government funded employees must not proselytize.
- Government funded programs must be held in a separate place or time from religious activities.

***Also, please note that the Healthy Futures Focus Area prohibits abortion services or referrals or the use of funds for the purchase of hypodermic needles intended for the injection of illegal syringes.*

A READINESS ASSESSMENT

FUNDAMENTAL QUESTIONS

1. Is your organization a public or private nonprofit organization – including labor organizations, faith-based and other community organizations; an institution of higher education; an educational institution; a government entity within the State of New Mexico; an Indian Tribe; or a partnership or consortia?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

   If the answer to the above question is "No" then your organization is not eligible to receive an AmeriCorps grant or serve as a Host Site for AmeriCorps members. You are similarly ineligible if your organization is a 501 (c) (4) non-profit entity [under the Internal Revenue Code of 1986, 26 U.S.C. 501 (c)(4)] that engages in lobbying.

2. Do your plans for utilizing AmeriCorps members call for members to provide services exclusively within the state of New Mexico?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

If the answer to the above question is "No" and the other results of this Assessment are favorable, then your organization may be interested in applying directly to AmeriCorps/the Corporation for National and Community Service for an AmeriCorps*National grant. Contact the Serve New Mexico Commission for details.

3. Do you plan to have AmeriCorps members engage in any of the following activities:

   □ **Yes** □ **No** □ **Unsure**

- Attempting to influence legislation;
- Organizing or engaging in protests, petitions, boycotts, or strikes;
- Assisting, promoting, or deterring union organizing
- Impairing existing contracts for services or collective bargaining agreements
- Engaging in partisan political activities, or other activities designed to influence the outcome of an election to any public office
- Participating in, or endorsing, events or activities that are likely to include advocacy for or against political parties, political platforms, political candidates, proposed legislation, or elected officials
- Engaging in religious instruction, conducting worship services, providing instruction as part of a program that includes mandatory religious instruction or worship, constructing or operating facilities devoted to religious instruction or worship, maintaining facilities primarily or inherently devoted to religious instruction or worship, or engaging in any form of religious proselytization
- Providing a direct benefit to— a. a business organized for profit; b. a labor union; c. a partisan political organization; d. a nonprofit organization that fails to comply with the restrictions contained in section 501(c)(3) of the Internal Revenue Code of 1986 related to engaging in political activities or substantial amount of lobbying except that nothing in these provisions shall be construed to prevent participants from engaging in advocacy activities undertaken at their own initiative; and e. an organization engaged in the religious activities described in paragraph C. 7. above, unless CNCS assistance is not used to support those religious activities
- Any funds used to purchase sterile needles or syringes for the hypodermic injection of any illegal drug
- Abortion Service and/or referrals
- Conducting a voter registration drive or using CNCS funds to conduct a voter registration drive

If the answer to the above question is "Yes" then your organization should review Mandatory Supplement Guidance or reconsider how your activities align with the AmeriCorps NOFO.

ADMINISTRATIVE

1. Does your organization have a track record of success with its programs?

   □ **Yes** □ **No** □ **Unsure**

2. Does your organization have the infrastructure to recruit, train, and support the efforts of AmeriCorps members? Variables include office space, technology, supervisory time and skill, financial expertise, and the ability to manage a team of AmeriCorps members.

   □ **Yes** □ **No** □ **Unsure**

3. Has your organization previously managed a federal, state, or foundation grant?

   □ **Yes** □ **No** □ **Unsure**

4. Are there formal internal controls governing all financial operations?

   □ **Yes** □ **No** □ **Unsure**

5. Does your organization have sufficient cash to operate a major grant on a reimbursement basis? If your program starts September 1, 2026, you will submit a reimbursement request, with supporting documentation, to the Serve New Mexico Commission by October 20, 2026, for expenses incurred

September 1 - September 30. Payments are made 15-30 days after submission of reimbursement requests if adequate documentation is provided upon submission.

☐ **Yes** ☐ **No** ☐ **Unsure**

6. Are the financial operations of your organization audited annually by an independent auditor?

☐ **Yes** ☐ **No** ☐ **Unsure**

If you answered "No" to any of the above questions, it is likely your organization would struggle to successfully administer an AmeriCorps grant. Consideration should be given to seeking a partnership with an existing AmeriCorps program or Applicant. Serving as an AmeriCorps host site, rather than as a primary grant applicant, is often a better option for smaller organizations. Contact the Serve New Mexico Commission for details.

ORGANIZATIONAL COMPETENCIES

The following questions address key elements of successful organizations. Completion of this portion of the assessment will help provide you with additional information about the capacity and structure in place to operate an AmeriCorps program.

ORGANIZATIONAL PURPOSE: THE MISSION

1. Does your organization have a clear written mission statement? (if no, skip to question 6)

☐ **Yes** ☐ **No** ☐ **Unsure**

2. Do all programs and efforts of your organization align with the mission?

☐ **Yes** ☐ **No** ☐ **Unsure**

3. Has your organization said "no" to potentially good opportunities which are not consistent with the organizational mission or strategy?

☐ **Yes** ☐ **No** ☐ **Unsure**

4. Is the mission of your organization understood by all stakeholders, including staff and board members?

☐ **Yes** ☐ **No** ☐ **Unsure**

5. Is the mission of your organization frequently referred to (e.g. in planning sessions and other meetings)?

☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL GOVERNANCE & OPERATIONS

1. Does the organization have written policies and procedures, including a conflict of interest policy for employees and directors?

☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL DIRECTION: STRATEGIC PLANNING

1. Does your organization have a clear and coherent written plan for the future (i.e. 3-10 year strategic plan)? (If no, skip to question #14.)

☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does the strategic plan have well defined measurable goals and achievable action steps with timeframes?

☐ **Yes** ☐ **No** ☐ **Unsure**

3. Are the goals in the strategic plan well known and understood by the staff and board?

☐ **Yes** ☐ **No** ☐ **Unsure**

4. Is this annual plan consistently used at all levels of the organization to guide organizations?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

5. Does the organization conduct regular assessment of internal operations to assess efficiency and effectiveness?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL REVENUE: SUSTAINABILITY

1. Does the organization have diversified funding from multiple sources?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL INFRASTRUCTURE: FINANCIAL MANAGEMENT

1. Are organizational and programmatic budgets closely and regularly monitored?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does your organization produce and review financial statements at least monthly?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

3. Does your organization have plans to secure the financial and in-kind resources to meet any required matches?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

4. Do you have the abilities to track multiple streams of funding?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

5. Is your organization's accounting system manual, automated, or a combination?

   ☐ **Manual** ☐ **Auto** ☐ **Combo** ☐ **Unsure**

6. How often are entries posted to the general ledger?

   ☐ **Daily** ☐ **Monthly** ☐ **Other**: _____

   ☐ **Weekly** ☐ **Unsure**

7. Does your accounting system allow cash basis reporting and for the recording of "in kind" contributions?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

8. Is your organization familiar with federal cost principles?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

9. Is your organization familiar with procedures for the determination and allowance of costs in connection with Corporation for National and Community Service grants and contracts?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL INFRASTRUCTURE: INTERNAL CONTROLS

1. Are checks signed by individual(s) whose duties exclude recording cash received, approving vouchers for payment, and the preparation of payroll?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Are employee payroll reports supported by appropriately signed documentation (timesheets, leave slips, etc)?

☐ **Yes** ☐ **No** ☐ **Unsure**

3. Are time and activity distribution records (time sheets) maintained by funding source and project type for each employee to account for total hours with your organization?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL INFRASTRUCTURE: TECHNOLOGY

1. Does every key staff member have access to a computer with up-to-date software, internet access and email capabilities?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does your organization have a computerized accounting system?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL INFRASTRUCTURE: HUMAN RESOURCES

1. Does your organization have a well-planned process to recruit, develop, and retain the best employees (and/or AmeriCorps members) in accordance with an equal opportunity environment?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does your organization provide staff and volunteers with written job descriptions and the necessary resources to carry out duties appropriately?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

3. Does your organization provide relevant and regular training for staff and board members?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

4. Are employee performance appraisals conducted on a consistent and fair basis?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

5. Does your organization have a well-planned process to recruit, develop, and retain volunteers?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

PROGRAM DESIGN: NEEDS ASSESSMENT AND IMPLEMENTATION

1. Does your organization conduct regular assessments of community need?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does your organization analyze and use the results of needs assessment to chart change?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

3. Are your organization's programs and services well defined?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

4. Does your organization have the ability to close a program that is no longer needed or relevant?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATIONAL IMPACT: MEASURING PERFORMANCE & CONTINUAL IMPROVEMENT

1. Does your organization have a comprehensive well-developed community assessment or evaluation system used to measure the impact of programs and services?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Does your organization conduct regular assessments of existing programs' effectiveness in meeting recipient needs and identify needs for improvement?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

3. Does your organization collect data to measure performance and progress on a continual basis?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

4. Is data analyzed, used in program redesign and communicated to stakeholders on a regular basis? (e.g. annual reports)

   ☐ **Yes** ☐ **No** ☐ **Unsure**

ORGANIZATION OUTREACH: PARTNERSHIP AND COLLABORATION

1. Does your organization participate in partnerships with other groups?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

2. Have these relationships led to mutually beneficial collaboration?

   ☐ **Yes** ☐ **No** ☐ **Unsure**

Please return your completed assessment with your Letter of Intent no later than October 9, 2026 by 11:59pm MST to servenm@dws.nm.gov . This assessment is to assist you in determining if your organization is poised to apply, receive funding and successfully implement an AmeriCorps grant.