



OFFICE OF THE CONTROLLER  
CITY AND COUNTY OF SAN FRANCISCO

Ben Rosenfield  
Controller  
Todd Rydstrom  
Deputy Controller

Citywide Nonprofit Monitoring and Capacity Building Program

NONPROFIT REQUEST FOR  
FINANCIAL MANAGEMENT COACHING

|  |  |
|--|--|
| <b>Nonprofit Name</b>  | <b>Date of Request</b>   |
| <b>Primary Contact</b>   |  |
| <b>Title</b>   |  |
| <b>Email</b>   |  |
| <b>Phone</b>   |  |
| <b>FUNDING DEPARTMENTS</b> (please check one or more):   |  |
| <input type="checkbox"/> Adult Probation Department<br><input type="checkbox"/> Arts Commission<br><input type="checkbox"/> Department of Children Youth and Families<br><input type="checkbox"/> Department on the Status of Women<br><input type="checkbox"/> Department of Public Health<br><input type="checkbox"/> Children and Families Commission (First 5)<br><input type="checkbox"/> Human Services Agency | <input type="checkbox"/> Human Rights Commission<br><input type="checkbox"/> Department of Homelessness and Supportive Housing<br><input type="checkbox"/> Mayor's Office of Housing and Community Development<br><input type="checkbox"/> Office of Economic and Workforce Development<br><input type="checkbox"/> Sheriff's Office<br><input type="checkbox"/> Other/not listed (please list): |
| <input type="checkbox"/> <b>Please check this box if you are a shelter-in-place (SIP) hotel provider</b>   |  |
| <b>COACHING REQUEST</b>  |  |
| Coaching is tailored to a nonprofit's needs and is meant to address strategic, operational, and transactional finance and governance functions to ensure your organization has the foundational tools you need to succeed.<br><b>Please describe the financial management improvements you would like to make through coaching. What is the reason for your request?</b> (Brief narrative)                           |  |
| <b>Please Select the Primary (1-2) Goal Categories</b>   |  |
| <input type="checkbox"/> Agency-wide Budget/Cost Allocation<br><input type="checkbox"/> Accounting/Reporting Systems (e.g., QuickBooks)/Chart of Accounts<br><input type="checkbox"/> Financial Reports and Metrics<br><input type="checkbox"/> Audited Financial Statements   | <input type="checkbox"/> Board Oversight<br><input type="checkbox"/> Policies & Procedures<br><input type="checkbox"/> Timesheets, Invoicing, Payroll<br><input type="checkbox"/> Other (please describe below)<br>Other description:  |
| <b>How much time do you anticipate you and your staff can dedicate to the coaching engagement?</b><br>Estimated number of <u>hours per month</u> :      Estimated number of <u>months</u> :  |  |
| <b>How confident are you that your organization can devote this amount of time to coaching?</b><br><input type="checkbox"/> Very confident <input type="checkbox"/> Moderately confident <input type="checkbox"/> Uncertain  |  |

Submit completed Coaching Request Form and direct questions to Angela Pride  
Office of the Controller – City Performance |Angela.Pride@sfgov.org |

|   |
|---|
|   |
| <b>How will your finance and governance staff participate in coaching?</b>  |
| <b>Do you have the right staffing currently to make and sustain the changes? What concerns do you have, if any, about your current staffing?</b>  |
| <b>Please provide additional comments about the above questions, as needed:</b>   |
| <b>Please attach these documents to the request</b><br><input type="checkbox"/> Most recent Monitoring Report Letter (if available)<br><input type="checkbox"/> Most recent audit and financial statements<br><input type="checkbox"/> Current agency-wide budget |