



JOY TO THE WORLD FOUNDATION
CHARITABLE INTERNSHIP PROGRAM (CHIP)
OPERATIONAL GUIDELINES

Purpose: To provide an opportunity for individuals to raise support and be paid for work they do for recognized charities as independent contractors.

Program:

The program is designed to provide a valuable employment or internship experience for individuals who would like to be involved in working for approved charities. It can also give these individuals the opportunity to begin developing a fundraising base and experience “living by faith” to determine if full-time charitable work might be something that they want to pursue in the future.

The Charitable Internship Program is structured as a Field of Interest Fund of Joy To The World Foundation and will provide paid internships or work experiences with approved charities for individuals who meet the requirements of the program. CHIP provides a means whereby charitable oriented individuals may receive financial support for their work in recognized charities, such as The Navigators, Campus Crusade for Christ, YMCA, YoungLife, Medical Clinics etc. rather than from unrelated secular employment. The CHIP advisory board must approve the selection of a charity for which the independent contractor will work. Joy To The World Foundation which is a tax-exempt public charity will operate the project. CHIP enables family, friends, other individuals and organizations to support an individual involved in charitable work through tax-deductible contributions. This program provides individuals who have been selected by charity staff for temporary work or positions in their respective organizations, to raise personal support to compensate them for their work with the charity so that they do not have to work at an unrelated secular job to earn money during the work experience. Joy To The World Foundation functions as a service agency and the Charitable Internship Program is not a scholarship program. The Foundation approves applicants and contracts with them to perform charitable service where they are. The charitable contractors, like many others in the nonprofit sector, serve as fundraisers to develop support for the CHIP program and their internship or work experience. The Charitable Internship Program of Joy To The World Foundation receives donations, keeps records of them and issues tax-deductible receipts for donors. The Charitable Internship Program pays monthly compensation checks for the charitable workers who are self-employed contractors.

The Charitable Internship Program is based on a very successful model that Student Ministries, Inc. developed for Seminary students. Student Ministries, Inc. was founded in 1976 and in its first 25 years, it worked with over 2,300 seminary students in charity and has distributed over \$32 million in support of these ministries.

Acceptance in the Program:

In order to be approved as a charitable contractor, the CHIP program requires that the applicant to:

1. Submit a formal application to Joy To The World Foundation,
2. Complete a budget and compensation worksheet,
3. Be recommended by a staff member of a recognized charity for work with that charity with a description of the duties and responsibilities the charitable contractor will have with the charity.

All prospective contractors should complete an application form with a budget, compensation worksheet and recommendation letter from a charitable staff member and send it into the Foundation. Applications will be reviewed and approved by the CHIP advisory committee of Joy To The World Foundation Board of Directors. Upon approval, the applicant will be notified of his or her acceptance, given a Handbook and other materials, will be set up with an account number and the charitable associate can begin fundraising for his or her project.

Charitable Supervision:

A qualified and appropriate staff person involved in the charity for which the contractor will be working, is required to supervise the contractor's charitable work. This should be the person in the charity's leadership structure who will directly supervise the contractor. Each supervisor shall sign an agreement to monitor the contractor's charitable activities, to consult regularly with the contractor, to provide any appropriate guidance needed, and report quarterly to the CHIP office regarding the contractor's charitable performance. The contractor's quarterly report and the supervisor's quarterly evaluations shall be completed and submitted to the CHIP office each quarter the contractor is involved in the program. It is the responsibility of the contractor to make sure that his or her supervisor receives these forms and submits them. Compensation will not continue if forms are not received.

Finances:

The Charitable Internship Program of Joy To The World Foundation operates as a service organization and as such, charitable contractors are required to raise the support needed to fund the charitable project with the Foundation in which they are contracted to perform services.

Joy To The World Foundation deducts an administrative fee of 5% from each contribution to the project for its operating expenses. Donations coming from other projects in Joy To The World Foundation will have a reduced administrative fee of 3%. While this fee does not cover our total operating expenses, it does help to defray the costs.

To assist the contractors in maximizing the opportunity to raise funds, CHIP provides an incentive for a contractor to commit to the process of developing his or her support. Initial commitment and diligence to the support development process will provide greater freedom to focus on charity for the remainder of the time with CHIP and allow for increased earning potential for that charitable involvement. To foster initial commitment, a total of up to 40 hours will be provided to a contractor for the purpose of support development to be used within the first two months following application approval. The contractor may receive compensation up to 40 hours or up to 50% of the account balance whichever is lower for this work.

Minimum Requirement:

A contractor has a maximum of six months after contracting with the CHIP program to reach the following minimum requirements for the term of the contract:

1. \$500 per month in contributions and
2. At least five donors per month, the majority of whom cannot be family members

The charitable contractor must work a minimum of 10 hours a week. The charitable contractor may be compensated for a maximum of 30 hours per week of work for the charity.

Communication with Donors:

Tax-deductible receipts and remittance envelopes for contributions are sent directly to the donors by the Foundation. Each CHIP contractor is responsible to recruit donors and to correspond regularly with them by means of notes or newsletters. After a contractor terminates from CHIP, he or she is requested to contact their donors and ask them to consider giving one or more additional gifts for the CHIP operating fund.

Compensation Rates:

The CHIP compensation rate is based on the work to be performed and is not based on need. The hourly compensation rate for the charitable performance of each contractor is determined by the following criteria:

1. The type of charitable performed
2. Previous charitable and work experience
3. The geographical location of the charitable
4. Related education or other experience

A Compensation Worksheet for determining compensation according to these criteria will be used by the advisory committee of the foundation to set the consultant's monthly compensation ceiling. The monthly ceiling includes all remuneration for one's approved charity.

Funds that remain in a contractor's project after they have terminated from the program or that come in after a contractor has terminated will be used for program operating expenses unless the contractor goes into full-time charity within 6 months of termination from the program. Under no circumstances will funds be returned to donors or given to contractors who are no longer involved in the program.

Terminating contractors are to notify donors of this policy.

Because the contractors are independent contractors and not employees of Joy To The World Foundation, they are responsible for reporting and paying any social security tax or income tax that may be due on the compensation.

Joy To The World Foundation has exclusive legal control and discretion with respect to the use of all assets contributed to the Foundation.



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Charitable Internship Program Application Form

Personal Information

Name: _____
Address Line 1: _____
Address Line 2: _____
City: _____
State/Province: _____ Postal Code: _____
Country/Region: _____
Web Site Address: _____
Home Telephone Number: _____
Mobile Telephone Number: _____
Fax Number: _____
E-mail Address: _____
Social Security #: _____
Date of Birth: _____

Charitable Organization

Organization's Name: _____
Address Line 1: _____
Address Line 2: _____
City: _____
State/Province: _____ Postal Code: _____
Country/Region: _____
Web Site Address: _____
Telephone Number: _____
Fax Number: _____
Supervisor's Name: _____
E-mail Address: _____
Organization's EIN (Tax ID Number): _____
Type of Organization: _____

Employment

Company: _____

Location: _____

Dates: _____ to _____

Job Title: _____

Work Description: _____

Accomplishments: _____

Company: _____

Location: _____

Dates: _____ to _____

Job Title: _____

Work Description: _____

Accomplishments: _____

Education

School or Program Name: _____

Dates: _____ to _____

Location: _____

Degree/Level Attained: _____

Description: _____

Accomplishments: _____

School or Program Name: _____

Dates: _____ to _____

Location: _____

Degree/Level Attained: _____

Description: _____

Accomplishments: _____

Involvement with Organization

Organization: _____

Dates: _____ to _____

Affiliation/Role: _____

Working with Joy to the World Foundation

How did you hear of Joy to the World Foundation:

How long do you expect to contract with Joy to the World Foundation:

What are your Goals in working with Joy to the World Foundation:

What is your monthly support goal?

What fundraising experience do you have?

ON ATTACHED SHEETS OF PAPER PROVIDE THE FOLLOWING:

1. CHARITABLE ACTIVITIES PROPOSAL. Provide a thorough description of your charitable activities and responsibilities as you understand them. Include how many hours per week you will be working and who would be supervising your position within the organization.

Professional Reference

Name: _____ Company: _____
Telephone Number: _____ Job Title: _____
E-mail Address: _____

Personal Reference

Name: _____ Company: _____
Telephone Number: _____ Job Title: _____
E-mail Address: _____

ACKNOWLEDGEMENT:

I have read, understand and agree with the Charitable Associates Program Policy Manual.

I understand that I am required to raise whatever financial support is necessary to fund my involvement with the Joy to the World Foundation Charitable Associates Program if I am accepted and offered a contract.

To the best of my knowledge, all of the information provided on this application is true and I understand that any false statement may be cause for me not to receive a contract or for me to be terminated from the program.

I authorize the Joy to the World Foundation to contact my references and to do a criminal background check on me if necessary. I release all references, employers

and academic institutions from liability for releasing information on me to the Joy to the World Foundation.

Signatures

Sign and print your name.

Charitable Internship Applicant

Date

Foundation Approval

Date



**CHARITABLE INTERNSHIP PROGRAM
COMPENSATION WORKSHEET**

This form is used to determine what compensation you are able to receive as an independent contractor for your work with the Charitable Internship Program. Any activities, related goods or services that are paid for in order to carry out your charitable activities assignment may be reimbursed separately if receipts or invoices are sent in to the Joy to the World Foundation offices.

Name: _____

SSN# _____

CAP ID#: _____

Compensation Criteria:	\$/hr
A. Charitable Associates Base Pay \$10/hr	\$ _____
B. Adjustments	
1. Ordained, Licensed, or Commissioned (add \$1.00)	\$ _____
2. Advanced Degree or Special Training (add \$2.50)	\$ _____
3. Charitable Position: Leader/Teacher/Director (\$1.50)	\$ _____
4. Charitable Experience	
a. Full-Time Experience _____ Years (add \$.66 per year)	\$ _____
b. Part-Time Experience _____ Years (add \$.33 per year)	\$ _____
5. Region: Where activities are being performed	\$ _____
6. Benefits: If you pay you own insurance and/or medical coverage enter \$3.84, otherwise enter 0	\$ _____
Total of Compensation Criteria	\$ _____
	Maximum \$30.00/hr

Signatures

Charitable Associate

Date

Approval Signature

Date



Charitable Internship Program Self-Employment Contract

This Contract is made beginning _____(date)

between the Joy to the World Foundation, Inc., a corporation organized and existing under the laws of the State of Colorado with its principal place of business at 4570 Hilton Parkway Suite 203, City of Colorado Springs, County of El Paso, State of Colorado, herein referred to as the Foundation, and

Name:

Address:

City:

State:

Zip Code:

herein referred to as the contractor.

Recitals.

The Foundation is in business not for profit, but for the purpose of promoting, encouraging and supporting charitable projects performed by associates who are

1. training for charitable service, and in the conduct of said business desires to engage the charitable services of the contractor.

The contractor agrees to perform these services for the Foundation under the terms and conditions set forth in this contract. In consideration on the mutual

2. promises set forth herein, it is agreed by and between the Foundation and the contractor as follows:

Section One: Nature of Services

The contractor will perform charitable services on behalf of the Foundation with respect to all matters relating to or affecting the accompanying charitable description. The aforesaid charitable services shall be proposed by the contractor and approved by the Foundation. As a part of the contractor's services, the contractor will report to the Foundation periodically and whenever any charitable activity changes occur.

Section Two: Places of Services

It is understood the contractor's charitable services will be performed largely at (name of charitable organization and City and State) , and that the contractor will not be required to come to the Foundation's Office in Colorado Springs, Colorado.

Section Three: Performance of Service

The means and methods of performance of the charitable services and the hours the contractor is to work on any given day will be entirely within the control of the contractor. The contractor shall select an approved supervisor to serve on behalf of the Foundation at the place of service and will consult regularly with the supervisor. The contractor will select a replacement supervisor any time the supervisor is unavailable to serve. The Foundation will hold the contractor responsible to serve the number of hours of charitable activities as stated on the accompanying compensation worksheet. The contractor will report to the Foundation any changes in the number of hours served.

Section Four: Reporting

The contractor agrees to give a Supervisor's Packet to his or her supervisor. The contractor also agrees to fill out quarterly report forms, to have the supervisor sign them, and to ensure that they are sent in to the Foundation office each month that they are due. The contractor further agrees to ensure that supervisor's evaluation or status reports are sent in to the Foundation office each month they are due. The contractor understands that he or she will not receive a compensation check for any month that these reports are not timely received by the Foundation office.

Section Five: Funding

The contractor agrees to develop support for the charitable service program of the Foundation. Upon the performance of the contractor's service, the Foundation agrees to compensate the contractor a total sum of not more than the amount specified in the compensation criteria therein. Service compensation will be paid monthly from funds as they are available in the charitable service account of the current month.

Section Six: Policy Manual

The contractor acknowledges having read and understands the Policy manual, and agrees to conduct his or her activities in accordance with its terms. The contractor acknowledges that the Foundation may unilaterally change the Policy Manual, and that any such changes may be effective immediately upon notice to the contractor.

Section Seven: Duration

The parties hereto contemplate that this contract will run until the completion of the contractor's service training or contractor's transition into another service of not more than one year's duration. At any time, either party hereto can notify the other that the agreement is not to continue beyond any stated month.

Section Eight: Status of Contractor

This contract calls for the performance of the services of the charitable association as an independent contractor, and the contractor will not be considered an employee of the Foundation for any purpose.

Section Nine: Services for Others

This contract does not restrict the contractor from performing any services for

any other person or firm at any time.

In witness whereof, the parties have executed this agreement.

Signatures

Charitable Associate

Date

Joy to the World Foundation Representative

Date



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**Charitable Internship Program
Reference Form**

Applicant's Name:

1. How long have you know the applicant and in what capacity?

2. Please evaluate the applicant on the following issues?

1-Unsatisfactory 2-Somewhat Satisfactory 3-Satisfactory 4-Highly Satisfactory 5-Superior

Competency	Rating				
	1	2	3	4	5
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Team Player	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization and prioritization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company representation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conflict management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence/Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Serve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please list special gifts, talents and strengths in this individual.

4. Please list any areas of concern that you feel we should be aware of.

5. Please state your observation of this individual's moral and ethical character.

About You

Your Name:

Phone#:

Date:

Signature:



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Charitable Internship Program
Supervisor's Agreement

Charitable Supervisor

Supervisor's Name:

Organization:

Title:

E-mail Address:

Address Line 1:

Address Line 2:

City:

State/Province:

Postal Code:

Country/Region

Charitable Associate's Name:

The Supervisors Consent:

"I agree to:

- Serve as a supervisor for the Charitable Associate.
- Monitor the Associate's charitable activities and provide any appropriate guidance needed.
- Consult with him/her regularly.
- Fill out and sign quarterly Charitable Associate Program evaluation forms four times a year and make sure they are sent to Joy to the World Foundation when due.
- Read the Associate's quarterly report forms, verify them and sign them.
- Notify the Associate of any month that I will be unable to function as his/her supervisor, whether it be temporarily or permanently.

Signature

Supervisor

Date

Please fax this agreement to the Joy to the World Foundation office at 719-266-4604.

Keep this copy for your own reference. Thank you for your willingness to serve in this capacity.



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Charitable Internship Program Supervisor's Instructions

Thank you for your willingness to serve in this capacity. Because Joy to the World Foundation uses independent, self-employed Charitable Associate Contractors to perform functions of its mission, it relies on volunteers to supervise and report their Charitable Program's on behalf of Joy to the World Foundation, to help verify that they meet Joy to the World Foundation's qualifications for compensations payments. Typically, the supervisor will be the associate's immediate superior in that charitable organization.

Joy to the World Foundation is responsible for approving its Charitable Associates, their charitable activities and their eligibility to receive compensation for their charitable performance.

Charitable Interns are responsible to:

1. Develop or obtain a charitable activity within or under a non-profit organization.
2. Identify and obtain the consent of a supervisor to serve on behalf of the Foundation.
3. Submit a charitable activities description to the Foundation.
4. Submit quarterly organization reports to the Foundation.
5. Report to the Foundation any changes in activities or hours of that organization whenever they occur.
6. Perform those charitable activities in order to receive compensation for it.

The only exception to #6 is that Associate is allowed two months off each year with pay: one month for vacation and one month for support development and maintenance.

Charitable Supervisors are to be responsible for the following:

1. Charitable Oversight. A Supervisor will monitor the associate's charitable activities and provide any appropriate guidance needed.
2. Regular Consultation. A Supervisor will consult regularly with the Charitable Associate.
3. Quarterly Reporting. A Supervisor will complete, sign and send quarterly evaluation reports on the Charitable Associate to the Foundation and will read the Charitable Associate's quarterly report, sign and verify them. **Please keep in mind that the Foundation will not issue a paycheck to the Charitable Intern for any month that the reports are not received by the due date.**
4. Termination: Please notify the Charitable Associate ahead of time if you will be unable to continue in this capacity either temporarily or permanently.



Charitable Internship Program Quarterly Report

This Fill-in Form will allow you to enter information while the form is displayed and then print the completed form for your records and for filing with the Foundation. Should you desire to print this form out and complete it by hand, please print clearly.

Due Date:

- 1st Qtr
- 2nd Qtr
- 3rd Qtr
- 4rth Qtr

Contractor

Name: _____

ID # _____

Supervisor Name: _____

Organization: _____

Expected Graduation date: _____

Joy to the World Foundation must receive a completed copy of this form between the 18th and 22nd of the appropriate month to issue your check!

1. List your service activities in general and the average weekly hours for each category Hours

Check here if your hours have changed (please explain below) Average Weekly Hours _____

2. Give a brief summary of your activities over the past three months.

3. What are some of your goals for the next three months?

4. List any income received for your Charitable Activities from the associated organization.

5. List any Vacation time used (number of weeks) during this quarter.

6. List any Support Development time used (number of weeks) during this quarter.

Associate's Signature: _____

"I have read this report and verify that it is accurate."

Supervisor's Signature: _____



Charitable Internship Program Quarterly Report

This Fill-in Form will allow you to enter information while the form is displayed and then print the completed form for your records and for filing with the Foundation. Should you desire to print this form out and complete it by hand, please print clearly.

Due Date:

- 1st Qtr
- 2nd Qtr
- 3rd Qtr
- 4rth Qtr

Contractor

Name: _____

ID # _____

Supervisor Name: _____

Organization: _____

Expected Graduation date: _____

Joy to the World Foundation must receive a completed copy of this form between the 18th and 22nd of the appropriate month to issue your check!

1. List your service activities in general and the average weekly hours for each category Hours

Check here if your hours have changed (please explain below) Average Weekly Hours _____

2. Give a brief summary of your activities over the past three months.

3. What are some of your goals for the next three months?

4. List any income received for your Charitable Activities from the associated organization.

5. List any Vacation time used (number of weeks) during this quarter.

6. List any Support Development time used (number of weeks) during this quarter.

Associate's Signature: _____

"I have read this report and verify that it is accurate."

Supervisor's Signature: _____



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**Charitable Internship Program
Supervisor Quarterly Report**

Review Period:		to		Review Date:	
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Name: _____ Supervisor Name: _____
 Title: _____ Department: _____
 E-mail Address: _____

Current Objectives:

Rating Scale	
5	Exceptional performance beyond all position requirements
4	Exceeds all position requirements
3	Exceeds some position requirements
2	Meets most or all position requirements
1	Falls below expected performance

Supervisors Evaluation – Please rate the Associate in the following areas

Competency	Supervisor Ratings
Responsibility	
Discipline	
Results oriented	
Organization and prioritization	
Leadership	
Service to Organization	
Communication	
Conflict management	

Self-confidence	
Integrity and reliability	

Supervisors Comments:

Upcoming Objectives:

Overall Ratings

Supervisor Overall Rating:

Supervisor Comments on Rating :

Signatures

Charitable Associate

Date

Supervisor

Date

Foundation Approval

Date