

# Area Accreditation

## 2019-2020



Special Olympics Indiana – Area \_\_\_\_\_ makes the following commitments and representations to Special Olympics Indiana in connection with the Program’s request to operate as an accredited program in the 2018-19 program year.

### Assurance:

Our Area Program certifies that all the information contained in this accreditation is true and correct.

### Rules and Regulations:

Our Area Program will follow, to the best of its ability, the rules and regulations of Special Olympics, including:

1. Operate within policies and by-laws of Special Olympics Indiana.
2. Appoint an Area Management Team (AMT) to conduct and expand the Special Olympics program in its Area.
3. Registration of all Class A volunteers (volunteers, coaches, chaperones, Unified Sports® partners) in the Volunteer Management System.
4. Conduct at least a bowling tournament in the fall and a track & field meet in the spring open to all County Programs in the Area.
5. Observance of the Special Olympics Code of Conduct by all participants.
6. Solicit and expend funds in accordance with State, Local, and Special Olympics Indiana regulations, and submit financial documentations to the State Office.
7. Authorized use of Special Olympics name and logo.
8. Refrain from entering into any written agreement (contract) without the agreement being reviewed and signed by Special Olympics Indiana.

Our Area Program will notify Special Olympics Indiana immediately if there are any changes in compliance with the standards outlined above.

### Territory:

Our Area Program will operate within its boundaries in the solicitation of funds and recruitment of athletes and volunteers. We understand that any requests for exception to this rule must be submitted in writing to the State Office, and subject to their approval.

### Accreditation Period:

The completed Accreditation must be submitted by the Area Director to the Special Olympics Indiana State Office **No later than September 13th.**

- Participation Report should reflect County Program activities in Area hosted competitions between July 1, 2018 to June 30, 2019.
- Area Management Team members listed should be current members as of completion of this accreditation.
- Budgets should reflect financial activities to be conducted January 1, 2020 through December 31, 2020.

### Failure to Comply:

The Area Program understands that failure to follow these agreements or submit an accreditation may result in immediate suspension of rights to conduct the Special Olympics Area Program and/or temporary restrictions to funds.

### Request Signature:

Under these conditions, we request accreditation as an Area Program in Special Olympics Indiana.

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Signature of Area Director

Date

### Approval:

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Signature of Special Olympics Indiana State Office

Date

### Special Olympics Indiana

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Created by the Joseph P. Kennedy Jr. Foundation for the benefit of persons with intellectual disabilities.

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## Area Management Team



List Individuals who currently serve on the Area Management Team. Any person is responsible for more than one job, list that person more than once. All team members **MUST** be Class A volunteers.

<i>Position</i>	<i>Name</i>	<i>Mobile Phone</i>	<i>Email</i>
Area Director	_____	_____	_____
Area Competition Director	_____	_____	_____
Secretary	_____	_____	_____
Treasurer	_____	_____	_____
Sports Coordinator	_____	_____	_____
Volunteer Coordinator	_____	_____	_____
Outreach Coordinator	_____	_____	_____
Families Coordinator	_____	_____	_____
Fundraising Coordinator	_____	_____	_____
Public Relations Coordinator	_____	_____	_____
ALPs Coordinator	_____	_____	_____
Athlete Representative	_____	_____	_____
LETR Officer Representative	_____	_____	_____
Technology Representative	_____	_____	_____
Utility Player	_____	_____	_____
Utility Player	_____	_____	_____
Utility Player	_____	_____	_____
Utility Player	_____	_____	_____
Utility Player	_____	_____	_____
Other: _____	_____	_____	_____
Other: _____	_____	_____	_____
Other: _____	_____	_____	_____

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## 2020 Budget

Budget for financial activities for January 1, 2020 through December 31, 2020.



### Revenues:

<i>Category (Account Code)</i>	<i>Revenue</i>	<i>Explanation</i>
40100 – Special Event Revenue	\$ _____	<i>Fundraising events</i>
40125 – Special Event Revenue Received from Chapter	\$ _____	<i>Polar Plunge, Plane Pull revenue</i>
40275 – Fundraising Event Revenue	\$ _____	<i>Program hosted Fundraisers</i>
40400 – Contributions	\$ _____	<i>Financial donations to program</i>
40525 – In-Kind Revenue	\$ _____	<i>Goods or services provided to program</i>
40800 – Grant Revenue	\$ _____	<i>Grant revenue achieved</i>
41100 – Games Entry fee	\$ _____	<i>Games entry fees paid by non-SO Agencies</i>
43025 – Concessions Revenue	\$ _____	<i>Revenue from concessions</i>
48500 – Games Revenue from Other Counties	\$ _____	<i>Entry revenue from Area, Invitationals, Tournaments</i>
<b>TOTAL REVENUES</b>	<b>\$ _____</b>	

### Expenses:

<i>Category (Account Code)</i>	<i>Expense</i>	<i>Explanation</i>
50275 – Consulting & Professional Fees	\$ _____	<i>Fees paid to someone for service, ex DJ, Entertainment, etc.</i>
50300 – Office Supplies	\$ _____	<i>Paper, printer ink, paperclips, etc.</i>
50315 – Supplies (Other)	\$ _____	<i>Water bottles, sports equipment, etc.</i>
50350 – Banners & Signage Expense	\$ _____	<i>Signs, banners, etc.</i>
50400 – Telephone (General)	\$ _____	<i>Cell phone, conference calls, etc.</i>
50500 – Postage & Shipping (General)	\$ _____	<i>Mailings postage</i>
50600 – Printing (General)	\$ _____	<i>Commercial printing (FedEx Kinko) expenses</i>
50700 – Office & Storage Space Rental	\$ _____	<i>Equipment Storage facility rental fees</i>
50725 – Equipment Rental	\$ _____	<i>Rental of equipment</i>
50775 – Facility Rental Expense	\$ _____	<i>Practice, competition, fundraising event rental fees</i>
50800 – Insurance - other	\$ _____	<i>Liability insurance coverage</i>
51100 – Travel & Transportation	\$ _____	<i>Rental vehicle, bus, trailer; gas for rental</i>
51125 – Meals & Lodging	\$ _____	<i>Meals, hotel stays</i>
51150 – Volunteer Recognition and Memorials	\$ _____	<i>Funeral flowers, recognition gifts for volunteers</i>
51200 – Conference Registration Fees	\$ _____	<i>ALPs University, State Conference Fees</i>
53050 – Fundraising Expense (A & C's only)	\$ _____	<i>Hosted fundraising expenses</i>
54125 – Incentives & Awards	\$ _____	<i>Banquet gifts and awards</i>
56000 – Medals & Ribbons	\$ _____	<i>Event medals and ribbons</i>
56050 – Staff and Volunteer Shirt Expense	\$ _____	<i>Shirts for volunteers, coaches, board members, etc.</i>
56055 – Uniform Expense	\$ _____	<i>t-shirts, uniforms</i>
56060 – Athlete Training Expense	\$ _____	<i>Lessons</i>
56075 – Referee & Umpire Stipends	\$ _____	<i>Officials for basketball, softball tournament</i>
56100 – Games Expense Paid to State Office	\$ _____	<i>Entry fees for State Competitions</i>
57000 – In-Kind Expense	\$ _____	<i>Item or service costs if they were not donated</i>
58025 – Concessions Expense	\$ _____	<i>Items to sell at concession stand</i>
58500 – Games Expense to Other A & C's	\$ _____	<i>Entry fees for Area, Invitationals, Tournaments</i>
59000 – Dues and Subscriptions	\$ _____	<i>Spreads the cost of a larger asset over a # of years</i>
59100 – Depreciation	\$ _____	<i>Spreads the cost of a larger asset over a # of years</i>
59125 – Miscellaneous Expense	\$ _____	<i>Other expenses</i>
<b>TOTAL EXPENSES</b>	<b>\$ _____</b>	

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## Equipment Storage Information



Please fill out the storage information below. Then proceed to the inventory list.

### Storage Location:

Name of Storage Facility or Household: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Do you rent above storage space?       Yes    No

If yes, contract dates: \_\_\_\_\_

Lease Name: \_\_\_\_\_

Is equipment insured?                       Yes    No

### Insurance Company Information (if applicable):

Insurance Company Name: \_\_\_\_\_

Agent Name: \_\_\_\_\_

Policy Contract Dates: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

## Technology Inventory

Computer Equipment and Supplies includes but is not limited to: computer, cameras, printers, radios, sound systems, cell phone, and any other electronics.

<i>Item</i>	<i>Kind (Brand)</i>	<i>Serial #</i>	<i>Paid for</i>	<i>Location</i>



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## Area Program Participation Report



Evaluate participation and activities from July 1, 2018 through June 30, 2019. Count the number of games played for team sports (basketball, flag football, soccer, softball, volleyball) and competitions for individual sports.

<i>Event, Area Program</i>	<i>Number of Athletes</i>	<i>Number of Unified Partners</i>	<i>Number of Games Played / Competitions</i>
<b>Area Spring Games:</b>			
Track & Field	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
<b>Golf Sectional:</b>			
Golf	_____	_____	_____
<b>Fall Bowling:</b>			
Bowling	_____	_____	_____
<b>Basketball Sectional:</b>			
Basketball	_____	_____	_____
<b>Other Events:</b>			
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
Other Sport (List: _____)	_____	_____	_____
<b>TOTAL</b>	_____	_____	_____