

# 2025 Sabbatical Award

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*The Durfee Foundation*

## *Applicant Information*

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### **Applicant Name\***

First and Last name

*Character Limit: 100*

### **Pronouns**

Ex: she/her/hers, he/him/his, they/them/theirs, etc.

*Character Limit: 100*

### **Title\***

If you are not CEO or Executive Director, you will not qualify for the Sabbatical. Please contact Durfee for further clarification.

*Character Limit: 250*

### **Home Address\***

*Character Limit: 250*

### **Resume that covers the past 10 years (at minimum)\***

*File Size Limit: 5 MB*

*The following questions are **optional** and intended to help the foundation better understand who we are reaching through our programs. Your decision to answer or not answer these questions will have no bearing your application's standing.*

### **Please select the option that represents how you describe yourself:**

#### **Choices**

Gender non-conforming or non-binary

Man

Woman

Prefer to self-identify

Prefer not to say

### **How would you describe your race and/or ethnicity?\***

#### **Choices**

African American or Black

American Indian, Alaska Native, or Indigenous

Asian or Asian American

Latina, Latino, Latinx or Hispanic

Middle Eastern or North African

Multiracial and/or Multi-ethnic  
Pacific Islander or Native Hawaiian  
White  
Race and/or ethnicity not included above  
Prefer not to say

### Do you identify as a member of the LGBTQ+ community?\*

#### Choices

Yes  
No  
Prefer not to say

### Do you have a disability?\*

#### Choices

Yes  
No  
Prefer not to say

## Organization Information

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### Organization Name\*

*Character Limit: 250*

### Organization Address\*

If your organization has multiple locations, please list the address of the organization's main headquarters, i.e. your primary place of work.

*Character Limit: 250*

### What issue area do you primarily focus on within your work?\*

#### Choices

Arts/Culture  
Civil/Human Rights  
Criminal Justice Reform  
Disability Rights  
Domestic Violence  
Economic Justice  
Education/Youth  
Environment/Sustainability  
Family Services  
Foster Care  
Health and Mental Health  
Housing and Homelessness  
Immigrant and Refugee Services  
LGBTQ Issues  
Other

Public Policy and Civic Engagement  
Reproductive Justice and Rights  
Social Justice and Advocacy  
Veterans Services  
Worker's Rights

**If other, please specify:**

*Character Limit: 250*

**Total Number of Staff\***

*Character Limit: 250*

**Number of Full-time Staff\***

*Character Limit: 250*

**Number of Part-time Staff\***

*Character Limit: 250*

**Website\***

Please include your website link so we can learn more about your organization.

*Character Limit: 2000*

**\*Optional\* Attach a brief description of your programs here.**

Upload only if you believe we can not easily find this information on your website.

*File Size Limit: 5 MB*

**Please describe the members of the community and geography you serve.**

*Character Limit: 3500*

**Brief Letter of Endorsement\***

Signed by the organization's board chair, that includes a plan for organizational management during the candidate's absence and upon their return, as well as a guarantee of maintenance of regular health or other benefits during the sabbatical period

*File Size Limit: 3 MB*

**Board Members\***

Provide a link to a list of your organization's board members (name, organization, and role, if relevant) from your website.

*Character Limit: 2000*

## ***Budget & Finances***

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**Annual Operating Budget\***

*Character Limit: 20*

**Does your organization have an endowment?\***

**Choices**

Yes

No

**If yes, what is the size of the endowment?**

*Character Limit: 100*

**What is the size of your cash reserve?\***

*Character Limit: 20*

**How many months of operating expenses does your organization have available as cash on hand?\***

*Character Limit: 250*

**Your Annual Salary\***

*Character Limit: 20*

**Annual Vacation Policy\***

*Character Limit: 100*

**Bonus Policy\***

*Character Limit: 250*

**Total Household Income\***

Including any consulting, rental, or additional streams of income.

*Character Limit: 20*

**Number of dependents, if any:**

*Character Limit: 100*

**Do you have any extenuating financial circumstances of which the Foundation should be aware?**

If so, please describe:

*Character Limit: 5000*

## *Application Questions*

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**Projected Sabbatical Start Date\***

Awardees will not need to begin their Sabbatical until July 1, 2026.

*Character Limit: 10*

### Projected Sabbatical End Date

The program requires a sabbatical of three or more consecutive months.

*Character Limit: 10*

### Why are you engaged in your current field of work?\*

*Character Limit: 3500*

### What significant lessons have you learned along the way?\*

*Character Limit: 3500*

### What do you see yourself doing five years from now (personally and/or professionally)?\*

*Character Limit: 3500*

### What is the projected length of your sabbatical? How would you like to use your time?\*

*Character Limit: 3500*

### At this point in your work & life, why would the Sabbatical be beneficial to you & the organization?\*

*Character Limit: 3500*

### Sabbatical Budget\*

In order to better understand your proposed plans, please fill out this template to sketch a preliminary plan of your travel and activities. You will have the opportunity to revise and refine your plans if chosen for the award. [Click here to download the template.](#) Please fill it out and upload completed document below. If you are selected, there are ample opportunities to adjust this document.

*File Size Limit: 10 MB*

### List of three Los Angeles area references who can speak to you and/or organization's leadership.\*

Please include their name, affiliation, email, and phone number. Please do not include board members or staff.

*Character Limit: 5000*