



# MATCHING GRANT FUNDING REQUEST FORM

## Funds Requested by:

\_\_\_\_\_  
REALTOR® Association Name

\_\_\_\_\_  
Date of Request

**Important Note:** This form is to be completed to request funds that match a donation by a local REALTOR® association to the project or program requesting the funds. Without local association funding, the NC Housing Foundation Matching Grant Fund cannot be used to fund the project/program. REALTOR® associations must attach a copy of the association's minutes that verify its funding of the below named organization and that authorize this request for matching funds.

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## Grant Recipient:

\_\_\_\_\_  
Name of Organization Receiving Funds

\_\_\_\_\_  
Address of Organization Receiving Funds

\_\_\_\_\_  
Name of Executive Officer

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

Check the appropriate description of the organization:

501(c)(3)

Housing Authority

CHDO

Local Govt.

Other \_\_\_\_\_

**Amount Requested:** \$ \_\_\_\_\_ (Max of \$4,000 per Local Assn, per Grant Cycle)

**Purpose of Funding:** \_\_\_\_\_

*(How the funds  
will be used)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Applications must be postmarked by September 30, 2019*

**Brief Project/Program Description:**

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**A. PROJECT/PROGRAM DESCRIPTION** *Please attach additional pages for your answers to the following questions and supporting materials, as necessary.*

1. Describe the purpose of the project/program, including the goals and scope (be as complete and concise as possible).
2. Describe the history/evolution of the project/program.
3. What are the benefits and who are the beneficiaries of the project/program? Include the number that will be served, the target population and how they will benefit.
4. How will this project/program affect housing affordability in your community? What is the problem that is being addressed?
5. Who has overall responsibility for the project/program, and, if different, who has day-to-day responsibility? How are these persons selected, and what are their qualifications?
6. Give a brief description of current projects, programs, activities and accomplishments. What are appropriate measures of the programs' success? For existing programs, please provide evidence of achievements.
7. Do other projects/programs in your community provide the same or similar service? How does this project/program differ from or compliment other projects/programs? List other organizations that are involved with this project/program.

**B. PROJECT/PROGRAM BUDGET**

1. What is the budget for this project/program? \_\_\_\_\_ What is the total budget for the entire organization (if different)? \_\_\_\_\_
2. What percentage of the project/program budget will be comprised of funds from NC Housing Foundation and local REALTORS®? \_\_\_\_\_
3. Has this organization received NC Housing Foundation funds in the past? List years, amounts and purpose.  
\_\_\_\_\_

4. How will Homes4NC funds be used in the following categories?

<b>Category</b>	<b>Amount</b>	<b>Percentage</b>
Admin/Overhead		
Direct Services		
Fundraising		
<b>Total</b>		

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**C. FUNDING STRATEGY**

1. Please indicate specific sources/groups that you have asked or will ask to support the project/program.

Source/Group	Contribution Amount

2. What fundraising techniques will be employed?  
\_\_\_\_\_
3. What is your timeframe for fundraising, and what is the timeframe for the project/program?  
\_\_\_\_\_
4. Has your organization successfully raised funds in the past for similar projects/programs? Please give examples.  
\_\_\_\_\_

**D. EVALUATION**

1. What are the expected results during the funding period?  
\_\_\_\_\_
2. How will you define and measure success?  
\_\_\_\_\_
3. How will the project/program results be used and/or disseminated?  
\_\_\_\_\_

**E. PUBLICITY/PROMOTION**

Grant recipients are required to feature NC Housing Foundation and its logo in any materials that publicize and promote the funded project/program. Grant recipients must contact NC Housing Foundation (see address below) to coordinate production of the marketing/recognition materials in advance of the project/program.

1. Please indicate the specific print and digital platforms on which NC Housing Foundation will be listed as a sponsor.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*I agree to send a follow up report to NC Housing Foundation (including samples of the marketing/recognition materials featuring the NC Housing Foundation sponsorship), within 90 days after the grant has been received.*

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Signature of Agency Director or CPO

Date

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Signature of Agency Officer of the Board

Date

**Attachments Required from Grant Recipient:**

1. Two Signatures Above or Board Resolution Authorizing the Grant Application
2. List of Board of Directors (include occupation and contact information)
3. List of Key Staff (names and qualifications)
4. Most Recent Financial Statements (audited, if available)
5. Current Budget (Board-approved)
6. Annual Report (if available)
7. Copy of REALTOR® association's minutes that verify its funding of the below named organization and that authorize this request for matching funds

**Send to:** N C Housing Foundation  
Attn: Michael McKinney  
4511 Weybridge Lane  
Greensboro, NC 27407

Email: [mmckinney@ncrealtors.org](mailto:mmckinney@ncrealtors.org)  
Questions: (336) 294-1415 ext. 160

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