



## 2020 REALTORS® GIVE BACK DAY SERVICE PROJECT GRANT APPLICATION (\$250.00 Max)

### 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:

### Purpose of Funding:

*(How the funds  
will be used)*

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

Is this a local association backed project? \_\_\_\_\_

How many members will participate in this service project? \_\_\_\_\_

What is the total volunteer hours donated to this service project \_\_\_\_\_?

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project Date: \_\_\_\_\_

Anticipated Costs of Project: \_\_\_\_\_

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

Anticipated collaborations with others:

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

Describe the needs in your community that this project will address: \_\_\_\_\_

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

Have you done this kind of project before or will it be a brand new effort? \_\_\_\_\_

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NC RELATORS® HOUSING FOUNDATION WILL MAKE FINAL DECISION ON AMOUNT OF GRANT TO BE AWARDED.

**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. Most Recent Financial Statements (audited, if available)
4. Current Financials
5. 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

**Deadline to Return completed application by May. 31, 2020**