

# 2025 Housing Opportunity Grant - Level 1 Application

Status: Started Date Submitted: This application has not been submitted. Submitted By:

Does the proposed activity adhere to the stated requirement?

First Name:

Last Name:

**Contact Title:** 

**Contact Email:** 

**Contact Phone:** 

Association:

Association ID:

Address 1:

Address 2:

City:

State:

Zip:

Association Executive First Name (if different from above):

Association Executive Last Name (if different from above):

Association Executive Contact Email (if different from above):

## Activity Details

### Amount Requested (Max \$3000): \$

- 1. Type of Initiative:
- 2. Projected Completion Date:
- 3. Describe the proposed initiative activity including key details on how it will be executed.:
- 4. Why is the association interested in conducting this initiative?:
- 5. How will this initiative advance the association's housing opportunity goals?:
- 6. How will the association measure success of the initiative? :

## **Budget Details**

The following are NOT eligible uses of grant funds.

- REALTOR® association staff time/hours, including contract staff
- Fundraising contributions or money to hold a fundraiser
- General operating expenses for the association or partner organization
- Donations to an organization or person including direct down payment or closing assistance
- Cash prizes or purchase of gifts and prizes
- Materials for construction/rehab of a property
- Landscaping materials
- Home furnishings or similar items
- Subscription fees for video conferencing services
- In-house association classroom rental fees
- Activities that benefit a single/select group of property owner(s)

### 7. Please provide your budget in the framework below.

Note: Associations are encouraged to use the majority of grant funds for expenditures related to the development and implementation of an activity (such as speaker fees, marketing, printing, etc.) rather than venue and catering costs.

#### Revenue

Housing Opportunity Program Grant (enter requested amount)	\$0
Contribution from other REALTOR® association(s)	\$0
Contribution from non- REALTOR® collaborating partners	\$0
Admission fee/tickets	\$0
Revenue from sponsors (e.g., booth rental, payment for advertising, etc.)	\$0
Total	\$0
Expenditures	
Consulting Fee	\$0
Venue rental	\$0
Catering/refreshments	\$0
Marketing	\$0
Speaker fees	\$0
Speaker expenses (travel, lodging, meals)	\$0
Total	\$0

Additional Budget Information: If applicable, use the space below to: provide explanations for "other" revenue or expenses noted above; provide an estimated number of attendees for activities with an admission fee; provide a breakdown of consulting fees; or provide details about in-kind contributions the association will make toward the activity.:

8. For local associations, the state association must be notified of this funding request. Please provide the name and title of the person at the state association who is most familiar with this request.

First Name Association Contact:

Last Name Association Contact:

**Association Staff Email:** 

9. In reference to THIS activity, has your association applied for funding from another NAR grant programs including Housing Opportunity, Fair Housing, Diversity and Inclusion, Consumer Advocacy Outreach or Issues Mobilization?::

10. If this funding request is approved, do you give NAR permission to share your application, and any outcomes?: