

23 Oak Branch Drive Greensboro, North Carolina 27407

336-854-5868 www.realtorshelpinggreensboro.org

## **GRRF MISSION**

The Greensboro Regional REALTORS® Foundation, Inc. is the charitable arm of our Association. Our mission is to support charitable and educational service in the community. The purpose of the Foundation is to enhance the quality of life in the Triad by providing financial support to projects and organizations whose purpose is the betterment of life for our citizens.

## **Guidelines for Funding**

- 1. To be eligible for the GRRF funding, your organization must:
  - a. Serve the greater Greensboro and surrounding areas that may include Guilford, Randolph, or Rockingham Counties
  - b. Have not-for-profit tax-exempt status
- 2. Organizations receiving GRRF funding agree to:
  - a. Submit this application detailing project
  - b. Give a brief presentation to the GRRF Board (10-15 minutes)
    - GRRF Board meets the 1st Thursday of the month
  - c. Provide any materials/brochures/PowerPoint for the presentation
  - d. Acknowledge GRRF support of project/organization
  - e. Submit W-9 form with tax exempt status
  - f. Submit brief report on success of project

The Greensboro Regional REALTORS Foundation complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). We expect that organizations requesting funding will also comply.

## **GRRF GRANT APPLICATION**

## **Organization Information**

grant acceptance.)

Orgar	nization Name:	
Addre	ess:	
City, S	State & Zip Code:	
Phone	e Number:	
Webs	site:	
Chief	Executive Officer Name:	
Grant	Contact Name:	
Signa	ture: Date of Request:	
Grant	Contact Phone:	
Grant	Contact Email:	
1.	Briefly describe your organization (your mission, goals, major programs, population served, number of people served by your organization each year.	and a
2.	Is this request for a specific community project? If not, how will you earmark the funds for gonganization support (ex: funds will be used to help buy supplies, install new windows, etc.).	
3.	Name of Project:	
4.	Date of Project:	
5.	If a grant is provided, when will the funds be used? (Funds should be used within one year	of

6.	Brief description of Project:		
7.	Who will this project serve? How many people will be served by this project? (population demographics, geographic location, etc.)		
8.	How will you measure the success of the project?		
9.	How many staff members and volunteers are part of your organization?		
10	<ol> <li>Describe existing or potential community partners that also contribute to this project, if applicable</li> </ol>		
1	How will you recognize GRRF support? (flyers, website, social media, etc.)		
12	2. Amount of support requested:		
1	3. Supplemental documents: Please list any supplemental documents provided with the application and attach them to email when submitting information.		
For GF	For GRRF Use Only - Amount of funding given		
-	Date check mailed  Success Report received date		