



**UWCA Housing Alliance**  
**Affiliate Application Form**  
[hud@uwca.org](mailto:hud@uwca.org) | (205) 458-8961

---

**Section A – Administrative Information**

1. Please list the legal name of your organization. *Note: the legal name of an organization should be listed on its IRS determination letter and should be the same as supplied on IRS Form 990.* Click or tap here to enter text.
  
2. Please list the EIN (Employer Identification Number) listed on your organization’s IRS determination letter. Click or tap here to enter text.
  
3. Has your organization been determined to be tax-exempt by the IRS? If yes, please attach the determination letter. If no, please attach other documentation of nonprofit or tax-exempt status. Click or tap here to enter text.
  
4. Please list the year your organization was founded. Click or tap here to enter text.
  
5. Please list your total operating budget for the current year with a breakdown of all funding sources (grants, program income, donations, etc.). Notate any unrestricted or general operating funds. Click or tap here to enter text.
  
6. Please list your organization’s website. Click or tap here to enter text.
  
7. Please list the contact information requested for your organization’s CEO or President. Click or tap here to enter text.
  
8. Please list the contact information for the person with whom you would like United Way to communicate. Click or tap here to enter text.
  
9. If your organization is being or has been supported by other United Ways, please list them here. Click or tap here to enter text.
  
10. Please provide some background information about your agency and your core mission. List any programmatic information pertinent to explaining your organizational purpose. Click or tap here to enter text.
  
11. Please indicate the demographic make up of your board of directors and staff. Attach a board list with contact information. Click or tap here to enter text.
  
11. Please describe your staffing structure (how many staff, how is their time funded). Attach an organizational chart. Click or tap here to enter text.
  
12. Please list the total unduplicated number of **housing counseling** clients served in the last year. Click or tap here to enter text.

---

### Section B – Financial Information

Provide the following budgets both for your agency and for your **Housing Counseling** program:

**Last Year Actual:** If possible, this should reflect audited information. If the audited information is not available or the agency’s audit does not match the calendar year, use information based on actual cash receipts and disbursements.

**This Year Budgeted:** Provide information based on the budget currently in place and approved by the board.

**Next Year Proposed:** Represents the budget projection for the upcoming year.

Please detail grant support from government, corporate, and private resources. Report the source of each grant, award and/or contract and its purpose. This information should correspond to the appropriate line items in the revenue section of the 3-year financial summary of your overall budget.

---

### Section C – Housing Counseling

List the housing counselors currently employed by your agency and their years of experience providing housing services/financial education (add more rows if needed).

Name	FTE Housing Counselor	Experience

1. How many of your housing counselors have completed formal training (Neighborworks, NCRC, etc.)? Please attached certifications for each discipline, resumes, and continuing education certificates. [Click or tap here to enter text.](#)
  2. Is your agency a HUD approved Housing Counseling Agency? If so, please attach verification. If no, have you ever reached out to HUD about becoming a HUD approved Housing Counseling Agency? [Click or tap here to enter text.](#)
  3. Has your agency adopted the National Industry Standards for Homeownership Education and Counseling? Please attach signed copies for each Housing Counselor. [Click or tap here to enter text.](#)
  4. List your Client Management System: [Click or tap here to enter text.](#)
    - A. Do you use your CMS to generate reports? [Click or tap here to enter text.](#)
    - B. Do you use your CMS to make notes, record action plans, financial analysis, and follow-up? [Click or tap here to enter text.](#)
    - C. Do you use your CMS to track grants? [Click or tap here to enter text.](#)
    - D. Do you perform regular quality review of your CMS data? [Click or tap here to enter text.](#)
  5. How do you evaluate program services? (Outside evaluation, satisfaction surveys, etc?) [Click or tap here to enter text.](#)
-

## Section D – Attachments

Please provide a copy of the following:

- Agency Organization Chart
- Breakdown of all current funding sources that details both restricted and unrestricted or general operating funds
- Agency's Housing Counseling Workplan (click [here](#) for more information)
- Most recent financial audit and management letter
- Most recent Form 990
- Year-end 9902 for the most recent fiscal year and projected 9902 for the current fiscal year (click [here](#) for more information)
- List of current year board of directors with contact information
- For each housing counselor: signed Code of Ethics and Conduct for National Industry Standards for Homeownership Education and Counseling, resumes, certifications for each discipline, and transcripts or certificate of completion of training in the past 2 years
- If applicable, a copy of HUD approval and most recent HUD performance review that include any findings and the resolution of those findings
- All MOU's for outside services and referrals