Application for Native American Community Impact Grant Program

	Date of Application:	
Applicant Information:		
Agency Name (Partner):		
Mailing Address:		
City, State, Zip:		
Person to Contact about this Application:		
Phone: Email:		
Applicant Classification: (check one – please re (NACIG) Program Guidelines for eligible applican	fer to the Native American Community Impact Grant nts)	
Nonprofit 501(c)(3) entity	Tribally Designated Housing Entity	
Other (please explain):		
Partnership Service Area: Metro Non-	-Metro	
Position/Staff Employment: New	Existing position with additional duties	
throughout the term of the funding agreement.)	al matching funds from sources acceptable to NIFA	
Source of Matching Funds:		
Source of Matching Funds:		
Source of Matching Funds:		
Attach a Word Document and Address the Follo	lowing	
a) Describe the purpose of the funds requested for the NACIG Partnership		
b) Describe the expected outcome of the NACIG Partnership		
c) Describe how the NACIG Partnership will assist in accomplishing items detailed in this		

application

1.

2.

3.

4.

5.

6.

d) Describe the Key Performance Indicators (KPIs) that will measure your progress and

community impact

Additional Documentation to Submit with Application

a) Applicant's Non-profit/501(c)(3) or housing entity designated status by a federally-

recognized tribe in good standing

b) Applicant's most recent tax returns

c) Applicant's most recent annual operating budget

d) Applicant's Strategic Plan

e) Evidence of experience of the Applicant's work in community and/or housing development

f) List of the Applicant's Board of Directors and all paid staff including their position and title

q) Documentation of Board of Director liability insurance (minimum of \$1,000,000)

h) Documentation of the match contribution(s) and source(s) thereof

i) Non-refundable program application fee of \$150 (fee can be paid by check written to NIFA

NACIG Program, credit card or ACH (contact NIFA for electronic payment instructions)

Instructions and Certification:

The undersigned Applicant hereby applies to the Nebraska Investment Finance Authority for a Native

American Community Impact Grant in the amount set forth in the Program Guidelines

To be considered for a Partnership, one copy of the Application (hard copy or e-mail in .pdf file) along

with the Application fee must be submitted and received at the address indicated below no later than

5:00 p.m. on the published due date set forth on NIFA's website (www.nifa.org). The Application must

be filled out completely with all questions answered and spaces completed (Sections #1-6) and all

required documentation labeled and attached.

Applications Should be Submitted to:

Nebraska Investment Finance Authority

ATTN: Native American Community Impact Grant

1230 O Street, Suite 200

Lincoln, NE 68508

OR Submitted Electronically to:

outreach@nifa.org

Date

The undersigned hereby certifies that the information set forth in this Application and in any documentation in support thereof, is true, correct, and complete. The undersigned understands that any misrepresentation may result in the cancellation of any resources allocated or reserved. The undersigned also agrees that NIFA may request additional information to evaluate this Application.

Applicant Signature	
Title	