



Please confirm your organization's eligibility to apply for Chapter 206 Grant funding.

**Are you registered with the
Commonwealth's procurement system
CommBuys?**

**Have you received Chapter 206 funding
in the past?**

**Has your organization received
certification as a Community
Development Corporation (CDC) by the
Commonwealth's Department of
Housing and Community Development
(DHCD)?**

**Please upload your CDC or DHCD
certification.**

**Is your organization a recipient of the
Collaborative Seal of Approval by the
Massachusetts Homeownership
Collaborative, administered by CHAPA?**

**Please upload your Collaborative Seal
of Approval from CHAPA.**

**Does your organization self-identify as a
Regional Foreclosure Education Center
or Consumer Counseling Agency?**

**Please check the
programming/activities your
organization provides.**

Organization & Contact Information

Enter the name of the organization this application is being submitted for.

Enter the name of the primary contact person within the organization applying for the Chapter 206 Grant.

Enter the title of the primary contact person.

Enter the email address of the primary contact person. We will use this email address to send a confirmation of the responses received in this submission.

If applicable, please enter additional contact email addresses, separated by semicolons (;).

Is the person submitting this application different from the primary contact?

Name of the person submitting this application.

Title of the person submitting this application.

Email address of the person submitting this application.

Is this person a professional grant writer from an outside company?

Enter the name of the company for which the grant writer works.

Introduction and Overview

Please enter your organization's Mission Statement.

Please provide a summary of your organization's current programs.

Please provide a list of personnel and their titles involved with the proposed Chapter 206 work-plan. If any positions are currently vacant, please provide the title for the position.

Are there any positions listed that are currently vacant?

Please provide a job description for any vacant positions.

Does your organization work with any licensed loan originators and/or mortgage brokers?

Please disclose all licensed loan originators any licensed loan originators and/or mortgage brokers as described above

Is your organization a Regional Foreclosure Education Center?

Does your organization have subgrantees?

**Please list your organizations
subgrantees, separated by a semi-colon
(;).**

**Will your organization be allocating
Chapter 206 funds to any subgrantees?**

Program Related Accomplishments and Statistics

**Does your organization have a
foreclosure prevention program
currently?**

**How many foreclosure prevention
clients were counseled, on average,
annually over the past 5 years?**

**Does your organization have a first-time
homebuyers program currently?**

**How many first-time homebuyer clients
were counseled, on average, annually
over the past 5 years?**

**Has your organization been awarded
Chapter 206 Grant funds in the past?**

**Was your organization awarded Chapter
206 Grant funds in 2024?**

**How many clients were served using
2024 Chapter 206 Grant funds?**

**Please provide a narrative describing
program-related accomplishments
achieved during the previously awarded
Chapter 206 Grant cycle.**

Describe how your organization will build on the accomplishments described above to address program deficiencies or future outreach constraints.

Foreclosure Prevention Programs

Will your organization be providing foreclosure prevention programs?

Please describe your organization's approach to negotiating with lenders. Include ideal best practices to solve foreclosure loan modification constraints.

Please describe your organization's approach to managing complex loan modification cases.

Please provide a description of your organization's solution to prevent foreclosure.

Please provide the number of clients who were able to avoid foreclosure in 2024.

Please describe the role your organization played in the foreclosure prevention resolution(s)

Please provide the number of clients who vacated their home due to foreclosure in 2024.

If clients were foreclosure upon, please provide a description of subsequent housing alternatives provided to the client.

Please provide a status update on the rest of your foreclosure clients.

First-Time Homebuyer (FTHB) Programs

Will your organization be providing first-time homebuyer programs?

Please provide the number of clients who successfully completed a homeownership certification program.

Please provide the number of clients who purchased a new home.

Please provide the number of clients who decided to wait to purchase a home.

Please explain the reasoning reasoning for clients delaying homeownership?

Identification of Target Population

Please identify the population your organization will target with the proposed programming.

Please provide community or regional data to support the need for funding in the area which your organization serves.

Implementation of Workplan

Please provide a narrative of how the Chapter 206 Grant funds will be used.

Please provide a timeline, including anticipated dates, of when you plan to hold seminars, counseling sessions, presentations, etc. Include goals for the number of clients you expect to serve in each session/presentation, etc.

Please provide expected client outcomes for all Chapter 206 funded programs.

Explain proposed efforts to reach desired outcomes and provide timeframes for expected outcomes.

Outreach

Please provide a detailed outreach plan for Chapter 206 programming.

Please detail any additional improvements or enhancements to your current communication strategies with clients.

Please provide an explanation of the progress you have made on prior years' outreach efforts.

Please explain whether target populations, particularly low or moderate income (LMI) individuals or families, have been helped or assisted through previous outreach.

If applicable, please provide a list of foreclosure prevention and/or first-time homeownership outreach events done independently.

If applicable, please provide a list of Foreclosure and/or FTHB events in collaboration with the Division of Banks (DOB) for the prior year.

If applicable, please provide a list of Foreclosure and/or First Time Homebuyers events in collaboration with the Office of Consumer Affairs for the prior year.

If applicable, please provide a list of Foreclosure and/or First Time Homebuyers events in collaboration with the other state agencies for the prior year.

If applicable, please provide a list of foreclosure prevention and/or first-time homeownership outreach events done in collaboration with other organizations.

Other Revenues, In-Kind Services, and Contributions

Has or will your organization apply for other direct revenues, in-kind services, and/or contributions related to the Chapter 206 programming?

Please provide a list of the other funding related to the Chapter 206 programming for which your organization has or will apply.

Please provide a narrative of other funding for which your organization is applying or has applied.

Please provide anticipated dates for award decisions for other funding described above.

Budget

Please enter the total dollar amount of Chapter 206 funding being requested.

Please upload a copy of your budget here.

Performance Tracking and Evaluation

Please provide a list of program reports submitted to the DOB during the 2024 funding period. Include dates that these reports were submitted.

Please list the name of the software or database used to track clients.

Please explain how you will track new client intakes.

Please describe how you will monitor the clients' progress thorough their service.

Please describe how you will track client outcomes.

Please describe how you will use previously collected data for the implementation of current services and program development.

Additional File Uploads and Information

Cover Letter signed by an individual with signatory authority within the organization

501(c)3 Certificate

HUD Certification

W-9 Form

Any additional information you want the Division of Banks to consider.

Finalize Submission

Date of submission.
