



## Program Partnership Application

All applications must include the following in your application:

1. Program Partnership Agreement
2. Organization Information Sheet
3. Program Narrative

If you are 501(c)(3) qualified and not a High Country United Way partner agency provide a copy of:

4. 501(c)(3) certification
5. Annual budget
6. Financial statement from an accountant

If you are not 501(c)(3) qualified, provide any information legitimising your organization.

### *NARRATIVE INSTRUCTIONS*

**Narrative specifications:** no more than 4 pages; 8½ x 11 paper; one-inch margins; 10-point font.

**The Narrative Title should include the following information:**

1. Organization Name
2. Program Name
3. Amount Requested

**Please address the following in the order listed:**

1. Overall purpose or mission of your organization and whom it serves.
2. Particular program for which funds are being requested:
  - a) Explain how program meets the mission of the High Country Women's Fund
  - b) Why program is needed
  - c) How program will address that need
  - d) Target population served by program
  - e) Program activities / content
  - f) Frequency offered; frequency of contact with clients
  - g) Number of staff and volunteers providing program services
3. Include a budget narrative of how funds will be used.
4. Describe how you plan to evaluate and report on the impact of this program.
5. If this program currently receives funding from High Country Women's Fund, summarize how those funds were utilized during the past year (specify program activities, population # served, success stories)
6. Summarize any significant funding changes (positive or negative) that have affected the agency's operations.

P.O. Box 144 • Boone, NC 28607 • Office: (828) 264-4007 • Fax: (828) 264-4005 • E-mail: [info@highcountrywomensfund.org](mailto:info@highcountrywomensfund.org)

[www.highcountrywomensfund.org](http://www.highcountrywomensfund.org)  
Serving Women of Avery and Watauga Counties

