Associate Application

Company Name: ______________________________________________________

Address: ____________________________________________________________

City, Zip: ____________________________________________________________

Agency Phone/Fax: ____________________________________________________

Contact Person: __________________________ Email: _________________________

Website Address: _____________________________________________________

Facebook: ____________________________________________________________

Twitter: ______________________________________________________________

LinkedIn/Other: _______________________________________________________  

Type of Agency

___ Financial Institution (total assets less than $250,000,000)
___ Financial Institution (total assets less than $1 billion)
___ Financial Institution (total assets over $1 billion)
___ State agency
___ Federal agency
___ National Intermediary
___ Other: ________________________________

Area(s) of Interest

___ Affordable Housing
___ Commercial Development
___ Multi-purpose Development
___ Mortgage Origination
___ Other: ________________________________
Role with Company

___ Mortgage Lender  ___ Small Business Lender  ___ Commercial Lender
___ CRA Officer  ___ Other: ________________________________

Affiliation(s)

___ HUD Approved Counseling Agency
___ ADFA Approved Homeownership Counseling Agency
___ LISC
___ NeighborWorks America
___ Mission of Hope
___ Other: ______________________________________________
___ Other: ______________________________________________

Why are you interested in becoming part of ACHANGE

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

What committees are you willing to serve to be a member of (check all that apply)

___ Annual Training Conference  ___ Public Policy  ___ Housing Counseling
___ Homebuyer Education  ___ Regional Workshops  ___ Fundraising/Grants
___ 501 (c) 3 development  ___ Community Service Awards

In applying for associate consideration, I agree with the mission of ACHANGE and will do my part to improve the quality of housing and life of Arkansas residents.

________________________________________  ____________________________
Signature  Title

________________________________________
Date

The mission of ACHANGE is to collectively promote quality affordable housing and community economic development in Arkansas.