

COMMUNITY MENTORS PROGRAM

APPLICATIONS DUE: SEPTEMBER 30, 2020

Please refer to the Community Mentors Program Guide while completing this application.

LEAD PARTNER INFORMATION:

- FHLBank Indianapolis Member Financial Institution
- Community Organization

Organization Name:	
Organization Address:	
City:	State:
Contact Name:	Contact Title:
Contact Email:	Contact Phone:

PARTNER ORGANIZATION INFORMATION:

Do you have a partner organization (i.e., If you are a FHLBank Indianapolis Member, are you partnering with a community organization to host the event or vice versa?) A partner organization is not required. If you do not have one, please skip to Community Information.

Organization Name:	
Organization Address:	
City:	State:
Contact Name:	Contact Title:
Contact Email:	Contact Phone:

COMMUNITY INFORMATION:

- Community Name/Location: Indiana Michigan
- Community Type: Neighborhood Multi-Neighborhood City Multi-City County Region
- Does community have a current planning/strategy document they are working from? Yes No
- Year of Plan:

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Brief History:

Strengths of Local Economy:

Weaknesses of Local Economy:

Describe Primary Local Industry:

Describe Local Housing Market:

Describe Current Community Challenges:

Describe Efforts Taken to Address Challenges:

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COMMUNITY MENTORS EVENT INFORMATION:

Why do you want to host a Community Mentors Event?

Three community issues/topics you want help in addressing by mentors and why:

1.
2.
3.

What do you want to get out of the Community Mentors Event?

EVENT PARTICIPANT INFORMATION:

Estimated number of participants at event:

Type of industry groups invited to event:

Do you currently have a list of attendees you would like to invite (including names, industry and email addresses):

Yes No

Do the anticipated invitees already convene on a regular basis? Yes No

If yes, why?

Are there plans for the group (that is convening for the event) to meet after the event? Yes No

If yes, please describe:

Who will be in charge of convening the group after the event?

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EVENT SPACE INFORMATION:

Event Space Name:	
Event Space Contact Name:	
Contact Email:	Contact Phone:
Maximum Seated Capacity of Event Space:	Estimated Daily Rental Fee:
Is catering available at this event space? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does Event Space know you are anticipating hosting an event? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EVENT DATE INFORMATION:

Preferred month (in 2021) to host event: April October

Preferred day to host event: Mon Tues Wed Thurs Fri

IMPLEMENTATION GRANT INFORMATION:

How do you anticipate using the implementation funding:

Implementation Grant Budget:

	\$
	\$
	\$
	\$
TOTAL	\$ 10,000.00

Please submit application to housing@fhlbi.com by 5:00 pm (Eastern)
Wednesday, September 30, 2020 with Subject heading: **Community Mentors Application**

For any program questions, please contact Megan Coler-Hasser at mcoler@fhlbi.com