

Connect to Own[®] Program

Homebuyer Education Provider Assessment Form

Instructions

Please complete this form in its entirety and return completed Assessment with all required documents to: homebuyereducation@bofa.com

Checklist for a completed package:

- Completed Assessment Form
- 501(c)(3) document
- HUD Action Plan (only required when Online Education is provided)
- Agency 3rd Party Client Authorization
- IRS W-9 form (latest version)

Homebuyer Education (HBE) Provider Name (Agency/Organization Name):	
Physical Address—Main (number, street, and suite no.):	City, State, and ZIP code:
Physical Address—Location 2 (if applicable):	City, State, and ZIP code:
<input type="checkbox"/> Provide all office locations where you offer homebuyer education (please use an additional sheet if necessary)	
Mailing Address: Same as Physical Address <input type="checkbox"/>	City, State, and ZIP code:
Website:	

Executive Director Name:	
Address: Same as Physical Address—Main <input type="checkbox"/>	City, State, and ZIP code:
Phone:	Email Address:

Homebuyer Education Contact Name:	
Address: Same as Physical Address—Main <input type="checkbox"/>	City, State, and ZIP code:
Phone:	Email Address:

Home Preservation Contact Name:	
Address: Same as Physical Address—Main <input type="checkbox"/>	City, State, and ZIP code:
Phone:	Email Address:

Contact Name of Bank of America Mortgage Specialist (if currently working with one):	
Phone:	Email Address:

Are you an approved affiliate of a National Organization? Check all that apply.		
<input type="checkbox"/> CCCS	<input type="checkbox"/> New York Mortgage Coalition	<input type="checkbox"/> NID-HCA
<input type="checkbox"/> HomeFree-USA	<input type="checkbox"/> NCLR	<input type="checkbox"/> Urban League
<input type="checkbox"/> HPN	<input type="checkbox"/> NCRC	<input type="checkbox"/> None
<input type="checkbox"/> MMI	<input type="checkbox"/> NFCC	<input type="checkbox"/> Other:
<input type="checkbox"/> NeighborWorks America	<input type="checkbox"/> NHS of New York	

Please answer ALL questions by selecting YES/NO or making the appropriate selections.	Comments (If no, please explain.)																												
1. Is your agency a non-profit organization? Must function as a private or public nonprofit organization. The agency must submit evidence of nonprofit status as demonstrated by Section 501c of the Internal Revenue Code. (Required) <input type="checkbox"/> Yes <input type="checkbox"/> No	Tax ID #: _____																												
2. If no, is your agency a governmental or quasi governmental organization? <input type="checkbox"/> Yes <input type="checkbox"/> No																													
3. Is your agency or an entity within your organization, originating mortgage loans or licensed as a wholesale mortgage broker? <input type="checkbox"/> Yes <input type="checkbox"/> No																													
4. Is your agency HUD certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how long? _____ HUD #:																												
5. Is your agency a HUD Intermediary? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how long?																												
6. Has your agency adopted the National Industry Standards for Homeownership Education and Counseling? http://www.homeownershipstandards.com/ <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, why not?																												
7. Do you offer loss mitigation/foreclosure prevention counseling for homeowners whose mortgages become delinquent? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, why not?																												
8. What % of your clients are low or moderate income? <input type="checkbox"/> Less than 50% <input type="checkbox"/> More than 75% <input type="checkbox"/> 50% - 75% <input type="checkbox"/> 100%	How do you capture this information?																												
9. Do you provide classroom training and counseling in-language for pre- purchase education/counseling or home preservation counseling? <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"></th> <th style="text-align: center;"><u>Pre-purchase Education & Counseling</u></th> <th style="text-align: center;"><u>Home Preservation</u></th> <th style="text-align: center;"><u>Landlord Education</u></th> </tr> </thead> <tbody> <tr> <td>English</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Spanish</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Cantonese</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Mandarin</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Vietnamese</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		<u>Pre-purchase Education & Counseling</u>	<u>Home Preservation</u>	<u>Landlord Education</u>	English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cantonese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mandarin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	List other language(s), if applicable:
	<u>Pre-purchase Education & Counseling</u>	<u>Home Preservation</u>	<u>Landlord Education</u>																										
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10. Please check all that apply <input type="checkbox"/> Face-to-face/ in person HBE <input type="checkbox"/> Night Classes <input type="checkbox"/> Online HBE <input type="checkbox"/> Weekend Classes <input type="checkbox"/> Phone based HBE	Name of online HBE program, if applicable:																												
11. How many hours are in your pre-purchase homebuyer education and counseling program (including one-on-one counseling and classroom/group sessions)? <input type="checkbox"/> 1-3 hours <input type="checkbox"/> 6-7 hours <input type="checkbox"/> 4-5 hours <input type="checkbox"/> 8+ hours																													
12. Does your organization charge a fee for participation in the homebuyer education program? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what is the charge?																												
13. Does your Homebuyer Education Certificate of completion disclose HUD ID#, company name or logo? <input type="checkbox"/> Yes <input type="checkbox"/> No																													

<p>14. How many homebuyer education classes are held each month?</p> <p><input type="checkbox"/> 1-2 classes per month <input type="checkbox"/> 6+ classes per month</p> <p><input type="checkbox"/> 3-5 classes per month</p>	
<p>15. What is your classroom capacity?</p> <p><input type="checkbox"/> Less than 5 participants <input type="checkbox"/> 26-49 participants</p> <p><input type="checkbox"/> 6-10 participants <input type="checkbox"/> 50+ participants</p> <p><input type="checkbox"/> 11-25 participants</p>	
<p>16. Which tracking software do you use?</p> <p><input type="checkbox"/> NeighborWorks Compass <input type="checkbox"/> Salesforce</p> <p><input type="checkbox"/> Counselor Max <input type="checkbox"/> Other</p>	List others, if applicable:
<p>17. Who are the top 3 lenders your clients work with?</p>	<p>1.</p> <p>2.</p> <p>3.</p>
<p>18. What are the top 3 products your clients utilize?</p> <p><input type="checkbox"/> FHA/VA <input type="checkbox"/> Mortgage Revenue Bond</p> <p><input type="checkbox"/> MCM/Home Possible <input type="checkbox"/> Other</p>	List others, if applicable:
<p>19. Does your organization offer a Down Payment Assistance Program? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	If yes, please provide name:
<p>20. How would you like customers to contact you?</p>	
<p>21. National Mortgage Licensing System number(s) for all staff, if applicable. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<input type="checkbox"/> Not applicable

Assessment completed by

Regional Manager Name: _____

Date: _____

HBE Point of Contact Name(Printed): _____

Once you have completed this form please save and email the PDF with all required documents to: homebuyereducation@bofa.com