

**Early Childhood Education (ECE) Educators  
Homeownership Initiative Application  
V7 8.7.25**

**Background**

Early Childhood Education (ECE) Educators are fundamental to the quality of life of the children they serve, the communities they are in, and the thousands of families in Milwaukee that could not go to work if there was not a safe and enriching place to send their children. For this program, ECE Educators means anyone who teaches, cares for, or works with children in third grade or younger.

ECE Educators have been displaced from the workforce because wages have not kept up with the increase in housing costs. Through the investments of the Department of Workforce Development, the Northwestern Mutual Foundation, the Zilber Family Foundation, the American Family Institute, the City of Milwaukee, LISC, CDA, and others, 40 new single family homes will be built near 5 major ECE Providers. The homes are exclusively for ECE Educators and will be sold for approximately \$105,000 each.

The demand for these homes is likely to exceed the number of homes available. Consequently, an application process has been set up where eligible ECE Educators can submit their information and there will be a lottery of eligible applicants to match as many applicants up as possible with the available opportunities. There will be a priority for residents that live or work near the homes that are being sold.

This process does not create a legal right and this process is simply a way to fairly distribute the opportunity to purchase properties when demand is expected to exceed supply. This process is not a lottery or raffle as defined by Wisconsin Law. The only legal rights an eligible buyer may have is an independent contract executed by the buyer and the seller of the home they are matched with. More details are available at [www.housingplan.org/ece](http://www.housingplan.org/ece).

**Submission Instructions**

Once you have completed and signed this application, please create a PDF for each attachment and submit at [www.housingplan.org/ECE](http://www.housingplan.org/ECE). If you are selected, we will notify you if you have been matched with one of the available homes, and you will have 5 business days to inspect the home and submit an offer to purchase.

This is a rolling submission process which means that if you are unsuccessful for the first home, you will be automatically entered into future lotteries until all 40 homes are sold. Applications are available as of August 12, 2024. Applicants must submit applications by 9/15/24 to be entered into the lottery for the first home. Applications will be accepted

at any time after 9/15/24 for future homes, until all 40 homes are matched. We anticipate that more homes will be available in late 2024 and late 2025. For questions, please contact: [info@housingplan.org](mailto:info@housingplan.org).

## I. Applicant Eligibility Certification

Please **initial** next to each statement below. If you are not able to comply with each statement, then unfortunately you are not eligible for this program. Please visit [www.housingplan.org/ece](http://www.housingplan.org/ece) for more details and information on other potential opportunities if you are not eligible for this one.

\_\_\_\_\_ **Employed by ECE Provider.** I am currently employed or own a Wisconsin Licensed Family Child Care Center or a Licensed Group Child Care Center (“ECE Provider”) (see [Directory](#)); and or I am employed by a public, private, or charter school and teach, care for, or work with children in third grade or below (“ECE Provider”); and I am attaching a letter from that employer.

\_\_\_\_\_ **ECE Educator.** My employment includes performing classroom instruction to children in third grade or below, or the supervision of employees that are providing classroom instruction to children in third grade or below.

\_\_\_\_\_ **HUD Certified Counseling.** I have completed an 8 hour homebuyer training course from a HUD Certified Home Buyer Counseling Agency, and that agency is co-signing this application; and I am attaching a copy of my certificate of completion to this application.

\_\_\_\_\_ **Pre-Approval Letter.** I have a pre-approval letter from a lender for a mortgage of \$90,000 or more; and I am attaching the letter from that lender.

\_\_\_\_\_ **Family Income.** My family income for all members of my household is not more than the amount listed on Appendix A.

\_\_\_\_\_ **First time homebuyer.** I, nor any other head of household (e.g. spouse or partner) have owned a home in the last three years. I, nor any other head of household, own any other residential real estate.

\_\_\_\_\_ **Deed Restriction.** I understand that there has been more than \$150,000 of public and private resources used to build these homes; and that there will be a deed restriction so that if I ever want to sell the home, that there are restrictions on how much I can sell the home for, and who I may sell it to. (See [www.housingplan.org/ece](http://www.housingplan.org/ece) for restrictions).

## II. Applicant Information

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

How many people are in your household: \_\_\_\_\_

What is your current individual annual income from all sources: \_\_\_\_\_

What is your family annual income from all sources: \_\_\_\_\_

## III. Employer Information

Name of Employer: \_\_\_\_\_

Primary Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If your employer has multiple locations, what is the address you work at:

Site Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

How many years have you worked in Early Childhood Education: \_\_\_\_\_

How many years have you worked for this ECE Employer or school: \_\_\_\_\_

**IV. HBCA Certification.** I have reviewed the employment and income information of the applicant, and to the best of my knowledge the information included in this application is consistent with the documents I have received and reviewed.

Name of HBCA Agency: \_\_\_\_\_

Representative Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**V. Home Preferences.** Please write your top three home preferences listed on the website.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

#### **VI. Applicant Certification**

I have included the following in my application:

\_\_\_\_\_ A copy of my Homebuyer Counseling Certificate

\_\_\_\_\_ A copy of my pre-approval letter from a lender for \$90,000 or more

\_\_\_\_\_ A copy of a letter from my employer utilizing the template letter available at [www.housingplan.org/ece](http://www.housingplan.org/ece)

I understand that this process, does not create a legal right and that this process is simply a way to fairly distribute the opportunity to purchase properties when demand is expected to exceed supply. This process is not a lottery or raffle as defined by Wisconsin Law. The only legal rights an eligible buyer may have is an independent contract executed by the buyer and the seller of the home they are matched with. More details are available at [www.housingplan.org/ece](http://www.housingplan.org/ece).

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## APPENDIX A

### HOUSEHOLD FAMILY INCOME LIMITS

Milwaukee-Waukesha-West Allis, WI MSA								
Income Limit	1-person	2-person	3-person	4-person	5-person	6-person	7-person	8-person
<b>Final FY2024 Low-Income Limits</b>	\$62,000	\$70,850	\$79,700	\$88,550	\$95,650	\$102,750	\$109,850	\$116,900

Subject to change based on [HUD Income Limits](#)

APPENDIX B  
TEMPLATE LETTER FROM EMPLOYER

[PLEASE PLACE ON EMPLOYER LETTERHEAD]

[DATE]

ECE Educators Homeownership Initiative  
c/o Community Development Alliance  
3800 W Lisbon Avenue  
Milwaukee, WI 53208

RE: Employee Certification

Dear Application Review Team,

Our organization is a Wisconsin Licensed Family Child Care Center or a Licensed Group Child Care Center or a public, private, or charter school that serves children in third grade or below ("ECE Provider").

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Employee Full Name: \_\_\_\_\_

Sincerely,

[Organization Representative]