

## Sponsorship Guidelines

UNC Health Pardee is pleased to award sponsorships and charitable contribution funding to organizations working to improve the well-being of our local communities and support the transformation of healthcare. Pardee serves the communities of Henderson, Buncombe, Polk, Transylvania, Haywood, and Rutherford counties.

Please note the following criteria required for consideration for Pardee community investment funding. The program focus or event benefit should align with the following:

- Support Pardee’s mission
- Provide health-related education, research, or direct services to the community
- Deliver critical programs and services to the community

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## Requirements and Deadlines

**Each applicant must complete the sponsorship application in its entirety in order to be considered. Any materials on the specific group, program or event must be sent with the application.**

Requests will be accepted and reviewed quarterly by the Sponsorship Committee. *Sponsorships are at the discretion of the sponsorship committee. We reserve the right to determine whether a request meets the eligibility requirements.*

Please note the following timeframes for application submissions and notification of sponsorship:

APPLICATION DEADLINE	FOR EVENTS AND PROGRAMS SCHEDULED	SPONSORSHIP NOTIFICATION
July 1	August to October	July 31
October 1	November to January	October 31
January 1	February to April	January 31
April 1	May to July	April 30

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## Application Submission

Please follow this process for submitting your application:

- Refer to the criteria and deadlines for submission timing.
- Attach any additional reference materials with this application.
- Email to [PardeeMarketing@unchealth.unc.edu](mailto:PardeeMarketing@unchealth.unc.edu)

***Thank you for all you do to support our community. We look forward to reviewing your proposal.***

## Contact Information

Date of Application*		Organization Name*	
Contact Name*		Title*	
Address*			
City*		State*	Zip Code*
Email*		Phone Number*	

**To determine the best fit for sponsorship, UNC Health Pardee uses the following guidelines. Please check all that apply.\***

- The requesting charity or organization aligns with the mission of UNC Health Pardee to improve the health of the communities we serve.
- The requesting charity or organization has/is a health-focused program, service or event that achieves measurable goals and outcomes.
- This program/service/event promotes aspects of health and wellness.
- Having a health care organization present and/or sponsoring this event will benefit the attendees.

## Request Information

Type of Request (PLEASE SELECT)*		
<input type="checkbox"/> Sponsorship	Requested \$ Amount:	
<input type="checkbox"/> <b>In-Kind Services</b> (i.e., athletic training services, first aid coverage, medical services, promo items) Please provide details of in-kind request such as # of hours needed on-site, quantities		
Has Pardee sponsored your organization in the past?	If yes, what year?	If yes, how much?
Please give a brief description of your organization.*		
Is your organization a 501 c3? <input type="checkbox"/> YES <input type="checkbox"/> NO		

## Request Information

Please explain how the sponsorship support will be used, and how it will benefit people in our community.

### Additional Details

### Event Information (if applicable)

Name of Event*			
Event Date*	Address/Location of Event*		
City*	State*	Zip Code*	
Target Audience*	Expected Number of Attendees*		
Purpose and Goal of Event*			

**Will UNC Health Pardee be recognized for the sponsorship?**     YES     NO

If yes, please explain how (invitations, programs, ads, etc.)