**Regional Letter of Interest Sample**

Stellar Pathways program **[Insert Date]**

To OCRA,

**[Insert Regional Name]** would like to be considered for the Stellar Pathways program during the 2024-2025 application year. As a Region, we understand the eligibility requirements and are prepared to meet all financial and time expectations if selected to participate in this program.

We have thoroughly reviewed the program information, eligibility requirements, financial requirements, and supporting documentation and feel strongly that we have the capacity to meet all the requirements and expectations.

Our Region has full support of our current leadership **[insert regional leader organization]** **and [Insert number and name of participating municipalities]**. The board signatures and local government officials’ signatures below indicate support and participation in the Stellar Pathways program, process, timeline, and guidelines.

If we are accepted into the program, including the region leader and all participating municipalities, commit to completing the Stellar Pathways program within the allotted time, including but not limited to the following responsibilities:

* Attend a mandatory Stellar Pathways program workshop.
* If chosen as a Stellar Pathway participant, develop a Strategic Investment Plan with a qualified consulting team.
* Present the Region’s Strategic Investment Plan to the Stellar Pathways Committee at the designated date and time.
* If chosen as a Stellar Pathway designee, implement Strategic Investment Plan projects and programs with the use of set-aside funding, bonus points, and annual funding rounds within five years of designation in coordination with the funding agency.

We understand that this letter of Intent and any requested documentation is due to the Office of Community and Rural Affairs no later than 12 p.m. ET, May 1, 2024. If we have any questions, we will notify our community liaison or contact the Stellar Communities inbox at stellarcommunities@ocra.in.gov

Sincerely,

[Insert Key Contact Name]

[Insert Title]

[Insert Phone Number]; [Insert Email]**Regional Letter of Interest Sample**

Stellar Pathways Program

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[Insert Name of Regional Partner Executive Director, Title] [Date]

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[Insert Name of CEO Local Unit of Government] [Date]

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[Insert Name of CEO Local Unit of Government] [Date]

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[Insert Name of CEO Local Unit of Government] [Date]

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[Insert Name of CEO Local Unit of Government] [Date]