*Agency Letterhead

Date

Agency Address City, State ZIP

RE: VOCA Match Waiver Request -	20XX-20XX	Award Agency a	a <mark>nd Grant #</mark>
Total Amount of Match Needed = <mark>\$</mark>	5		

Total Amount of Match Provided =\$Total Percentage of Match Provided =\$Total Amount of Match Waiver =\$

This request is written on behalf of <mark>Agency</mark>, a nonprofit organization, to request a match waiver for our VOCA match requirement in the amount of \$_____. The match waiver is requested to alleviate the burden of the increased match due to VOCA funds.

Body of Letter:

- Briefly explain the number of FTE to be funded by VOCA and the services to be provided by VOCA project staff (1-4 sentences).
- If it is difficult to recruit/retain volunteers explain (may be helpful to include some barriers to recruiting, training, or retaining volunteers).
- If match would come from other sources (rather than volunteers, such as cash match) explain the difficulty in meeting match requirements through cash match (non-federal sources).
- Explain how services/programs to victims would suffer if match waiver were not granted.

Summarize request and repeat request for match waiver.

Signature of Project Director or Signing Official