

2019 Continuum of Care Intent to Apply & Threshold Assessment

Renewal projects wishing to apply for Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funding in the FY2019 HUD CoC competition must completed the following information and submit to the CoC by the deadline. Your project will not be eligible to apply in the FY2019 competition if you do not submit this form by **July 17, 2019**. Please complete the proposed project overview and review each of the following ranking categories, marking those questions that apply to your project.

Name of Agency	Agency Contact and Email
Name of Project #1	Contact Name and Email
Name of Project #2	Contact Name and Email
Name of Project #3	Contact Name and Email
Name of Project #4	Contact Name and Email
DUNS #	SAM #

Intent to Apply:

- Our agency will NOT apply for funding in the 2019 HUD CoC Competition. *(Please skip to agency signature and return to Tammy Smith @ tsmith@cmhp.net .*
- Our agency intends to apply for funding in the 2019 HUD CoC Competition. *(Please proceed to question one and complete all questions, sign and return to Tammy Smith @ tsmith@cmhp.net.*

Project Description:

Renewal:

Are you interested in voluntarily reducing your renewal grant for reallocation?

Yes No

If yes, please explain why?

If yes, by what amount? _____

If yes, describe how participants will not become homeless as a result:

1. The project component is: PSH: Chronic/Not Chronic RRH HMIS TH CES
2. Target Population:
 Singles # ___ units/ ___ beds Families # ___ units/ ___ beds Youth # ___ units/ ___ beds
3. Proposed Start Date: _____, 2020 Proposed End Date: _____, 2021/22
4. Amount of funding requested: \$ _____

Coordinated Assessment & Referral

- The applicant does NOT agree to participate in the CoC.
- The applicant agrees to participant in Coordinated Assessment & Referral including:
 - Filling all beds/units through the central prioritization list & process
 - Abiding by CoC Coordinated Assessment policies & practices

CoC Participation

- The applicant agrees to regularly attend CoC meetings and participate on a committee.
- The applicant agency agrees to provide project level data to the CoC by:
 - a) Participating in the annual point-in-time sheltered and unsheltered count;
 - b) Submitting program reports to the CoC in a timely manner;
 - c) Participating in an annual CoC Planning, Gaps Analysis and Needs Assessment;
 - d) Submitting required LSA, HIC, PIT and GIW reports by CoC deadlines; and
 - e) Giving the Local System Administrator administrative access to your all programs reported in the HIC or providing necessary waiver request to CoC and submitting required data in a timely manner.

HMIS

- Applicant does NOT currently utilize HMIS and does not intend to if funded. (Note this will affect your eligibility if not a VAWA funded agency)
- Applicant does NOT currently utilize HMIS, but agrees to utilize if funded.
- Applicant currently utilizes HMIS and assures compliance with:
 - Unique user name and password
 - Secure location for equipment
 - Locking Screen Savers
 - Virus protection with auto update
 - Individual or network firewalls
 - Restrictions on access to HMIS via public forums
 - Compliance with HMIS policy and procedures manual
 - Validation of off-site storage of HMIS data

Energy Star and Green Development (TH, RRH, and PSH Applicants ONLY):

- Project does incorporate Energy Star and/or Green Development
 - If fixed site utilizes incorporates Energy Star and/or Green Dev. in project.
 - If scattered site, encourages participants to seek applicable buildings/units.
- Does NOT incorporate Energy Star and/or Green Development

Services (TH, RRH and PSH Applicants ONLY):

Please check ALL that apply to your program:

- Applicant assures that program will have and follow policies that ensure all children are enrolled in school and connected to appropriate services within the community
- Applicant assures that case managers will systematically assist and support clients in completing applications for mainstream benefits.
- Applicant assures that transportation assistance is provided to clients to attend mainstream benefit appointments, employment training, or job when appropriate.
- Homeless assistance providers use a single application form for four or more mainstream programs.
- Applicant agrees that all participants will come from the streets, emergency shelter, transitional housing (entering as homeless), institution, or place not meant for human habitation.
- Applicant incorporates known best practices models into project policies and practices.
Check all that apply:
 - Housing First
 - Client Centric
 - Barrier Free
 - Harm Reduction

Chronic Homeless Preference (Renewal PSH Projects)

- Applicant agrees to give preference to Chronic Homeless when filling vacant units.
- Applicant does NOT agree to give preference to Chronic Homeless when filling vacant units.

Annual Progress Report: (RENEWAL Projects)

HUD and the CoC require that CoC funded projects submit an Annual Progress Report (APR)

Applicant did NOT submit an APR for the most recent grant year.

Applicant submitted an APR for the most recent grant year.

Date of APR submission: _____

Are there any outstanding findings still unresolved? Yes No

If yes, explain:

Project Quality Threshold: (RENEWAL applicants)

Please check ALL of the following thresholds that apply to your program/agency:

- Draws down from eLOCCS at least quarterly
- Submitted annual APR to CoC and HUD by deadline
- Assists participants achieve and maintain independent living (Does not apply to HMIS)
- NO: Audit findings, history of financial mismanagement, untimely expenditures, major capacity issues affecting program outcomes, history of ineligible persons, or spending.
- Compliant with Fair Housing and Equal Opportunity
- NO: HUD resolutions of outstanding suspension
- NO: Delinquent federal debts or outstanding arrears to HUD.
- Applicant demonstrates all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met;

In the past, having letters indicating financial support (“leverage letters”) for its projects improved the CoC’s score in the national competition. In 2019, as in 2018, the CoC is not scored on the amount of leverage it submits and leverage documentation is not required as part of the project application. Match remains a requirement, with the exception of “leasing only” projects.

Match requirement – 25%

% of Leverage _____ Total Leverage \$ _____

% of Cash Match _____ Total In-kind Match \$ _____

Eligible Match Contributions:

- Cash match – federal (excluding CoC program funds), State, local, and private sources, provided the funds from the source are not statutorily prohibited to be used as match. NOTE: Program income CAN be used as match.
- In-kind match – value of any real estate property, equipment, goods, or services contributed to the project as match, provided that the recipient or sub recipient had to pay for them with grant funds, the costs would have been eligible.
- Advocacy
- Children’s programming – materials, events, child care services
- Counseling - recovery groups, support groups, therapy
- Education, Employment & Training activities
- Financial Services
- Health services

- Housing – motel vouchers, housing search, leased value of building, etc...
- Human Resources
- Operations

Written Commitments:

- Must be documented on letterhead stationary
- Signed by an authorized representative
- Dated – see FY 2019 NOFA Project Application Detailed Instructions for date range
- In your possession at the time of application submission
- Must contain the following:
 - Name of the organization providing the contribution
 - Type of contribution
 - Value of the contribution
 - Name of project and sponsor organization to which the contribution will be given
 - Date the contribution will be available

Housing First Questions & Resources

For agencies with more than one project- you may complete this section once if all projects have the same eligibility criteria. If eligibility criteria differ from project to project please be specific below on which projects require eligibility and why.

- 1) Are applicants allowed to enter the program without income?
 Yes No If no, please describe what the income requirements are and why they are required.

- 2) Are applicants allowed to enter the program even if they aren't "clean and sober" or "treatment compliant"?
 Yes No If no, please describe what requirements exist are and why they are required.

- 3) Are applicants allowed to enter the program even if they have a criminal background?
 Yes No If no, please describe what requirements exist around criminal background are, why they are required, and describe any appeal process in place.

- 4) Are service and treatment plans voluntary, such that tenants cannot be exited from the project for not following through?
 Yes No If no, please describe what the service requirements are and why they are required.

Project Level Information:

For agencies with more than one project- Please complete the below information for EACH of your projects that will be renewing in 2019.

Project #1 Description:

1. Are you interested in voluntarily reducing your renewal grant for reallocation? Yes No
If yes, please explain why?

If yes, by what amount? _____
If yes, will you still be able to serve the same number of participants with reduced funding?
 Yes No
2. The project component is: PSH RRH HMIS TH SSO (includes CES projects)
3. Target Population:
 Singles #__units/___beds Families #__units/___beds Youth
#__units/___beds
4. Current Grant Term: _____
5. Amount of funding requested: \$ _____

6. Annual Progress Report:

HUD and the CoC require that CoC funded projects submit an Annual Progress Report (APR)

- Applicant did NOT submit an APR for the most recent grant year.
- Applicant submitted an APR for the most recent grant year.

Date of APR: _____

7. Are there any outstanding findings still unresolved? Yes No
If yes, explain:

8. Cash Match

% of Cash Match _____

Written commitments are required for all project applicants. Commitment letters must be dated within 60 days of the CoC application deadline of September 30, 2019. Commitment letters must be submitted with each project application.

Project #2 Description:

1. Are you interested in voluntarily reducing your renewal grant for reallocation? Yes No

If yes, please explain why?

If yes, by what amount? _____

If yes, will you still be able to serve the same number of participants with reduced funding?

Yes No

2. The project component is: PSH RRH HMIS TH SSO (includes CES)

3. Target Population:

Singles # ___ units/ ___ beds Families # ___ units/ ___ beds Youth

___ units/ ___ beds

4. Current Grant Term: _____

5. Amount of funding requested: \$ _____

6. **Annual Progress Report:**

HUD and the CoC require that CoC funded projects submit an Annual Progress Report (APR)

Applicant did NOT submit an APR for the most recent grant year.

Applicant submitted an APR for the most recent grant year.

Date of APR: _____

7. Are there any outstanding findings still unresolved? Yes No

If yes, explain:

8. **Cash Match**

% of Cash Match _____

Written commitments are required for all project applicants. Commitment letters must be dated within 60 days of the CoC application deadline of September 30, 2019. Commitment letters must be submitted with each project application.

Additional Applicant Questions

5) Briefly describe any innovative practices or policies your project implemented during the past calendar year, and their impact on project performance (*1000 character limit*).

6) Please indicate the number of clients who were terminated from your project during the past calendar year, noting the termination rationale/circumstances in each case.

Written commitments are required for all project applicants. Commitment letters must be dated within 60 days of the CoC application deadline. Commitment letters must be submitted with each project application.

WARNING: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Print Name of Agency Approved Signatory:	Signature of Agency Approved Signatory
Title	Date