

NY-511 Continuum of Care: New Project RFP 2021 (Reallocation and/or Bonus Projects)

APPLICATION MUST NOT EXCEED THREE (3) PAGES

1. Applicant/Agency Name: _____
2. Agency Point of Contact: _____
3. Proposed Project Name: _____
4. Is the applicant a current member of NY-511 Continuum of Care (CoC)? Yes – 10 points No – 0 points
 - a. If no, what is the agency's current involvement with NY-511 Continuum of Care?
5. Is the agency applying a current CoC funded grantee? Yes – 5 points No – 0 points
 - b. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC? Yes – 0 points No – 5 points
6. Does your agency currently report in the CoC's HMIS system? If not, how will you implement HMIS for this project? (5 points)
7. Please provide a detailed description of the agency's experience in administering projects dedicated to serving an underserved population. Please specify the name of current or past programs and note the funding sources. (10 points)
8. Do any of the following apply to your proposed program? (10 Points)
 - Veterans
 - Persons with Disabilities
 - Families with Children
 - Dedicated to Youth
 - Dedicated to Persons with Substance Use Disorders
 - Prioritize Sex Offenders
9. Please provide a project *description* that addresses the entire scope of your project. Please include the target population that will be served and the outreach plan. (0 – 20 points)

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8 points if the budget notes at least 80 percent of the requested funds are dedicated to housing

5 points if Youth/Parenting Youth and/or Families are mentioned

4 points if an outreach plan is noted and the extent of coordination the agency will have with the local DSS.

2 points if a specific priority population mentioned in the [Home Together: The Federal Strategic Plan to Prevent and End Homelessness](#) is noted

1 points if the project clearly states the number of units/beds requested

10. How will your program identify and connect clients with wrap-around services they require (e.g., mental and/or physical health care, peer support for formerly incarcerated persons or those aging out of the foster care system, etc.)? (5 Points)

11. Please describe the project's understanding of and willingness to participate in the Coordinated Entry Process that is being implemented by the Continuum (5 points).

12. Will the project be able to begin within 12-18 months? Yes- 5 points No – 0 points

13. Please describe how the need for this project within this geographic area was identified.
5 points for referencing *local quantitative data*.

14. Describe how the proposed project will demonstrate a commitment to Housing First and service prioritization as outlined in CoC NY-511's *Written Standards for Providing Continuum of Care Assistance*. (Character limit 2000)
3 points for describing how the proposed project will demonstrate a commitment to Housing First
2 points for describing how the proposed project will demonstrate a commitment to Service Prioritization

15. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? Yes – 5 points No – 0 points

16. Please provide a 12-month Budget Proposal and attach a copy of your organization's most recent financial audit. (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance	\$	

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(80% total budget less Admin)		
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	