SOUTHERN TIER HOMELESS COALITION (STHC) LETTER OF SUPPORT REQUEST

For members of the STHC:

1. Please provide a brief summary of the project. (250-word limit)

- As a member of STHC, is the Agency in good standing with attendance of CoC Membership Meetings?
 □ Yes □ No
- 3. What is the agency's involvement in the CoC (Board participation, committee participation, etc.)?

For non-members of the STHC:

- 4. Please provide an Agency description, including: history, mission, who the agency serves, and where the agency is located. (<u>2-page max</u>. <u>please attach</u> to this form)
- 5. How will the agency become a member of the STHC? (150-word limit)

For ALL:

6. How does the project align with the STHC Mission? (250-word limit)

7. How does the project described align with the Strategic Plan? (150-word limit)?

Please return **completed** forms to the CARES Planning Lead Aubrie Graves (agraves@caresny.org), the Board President (<u>wrivera@ofoinc.org</u>).

Forms will be reviewed by the STHC Governance Committee. Responses will be sent out no later 15 business days after receipt of the request.