

**SOUTHERN TIER HOMELESS COALITION (STHC)
LETTER OF SUPPORT REQUEST**

To request a letter of support from the Southern Tier Homeless Coalition, the requesting Agency must complete the entirety of the following form.

Agency Name: _____

Email Address: _____

Mailing Address: _____

I, _____, on behalf of _____ am requesting a letter of support from the Southern Tier Homeless Coalition for a project being proposed to:

Is the agency requesting the letter a member of the STHC? Yes No

For members of the STHC:

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

2. 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. (2-page max. – please attach 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 (agraves@caresny.org), the Board President Tim Lockwood (tlockwood@ccocc.org)

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