**APPLICATION**

* **The YHDP Team reserves the right not to review late or incomplete applications or projects that don’t meet eligibility requirements.**
* **Applications are due by 5pm on Monday, May 6th, 2019 and should be emailed to Vermont Coalition to End Homelessness CoC Support Specialist Andrea Hurley at** [**andrea@vsha.org**](mailto:andrea@vsha.org)
* **Please email questions regarding the RFP and application to Andrea Hurley:** [**andrea@vsha.org**](mailto:andrea@vsha.org) **(She will answer questions, or refer you to technical assistance)**
* **Please save your document with the following naming convention:**
* **<Agency name –Program name- YHDP>.**
* **Example: ABC Services-Home to Stay-YHDP.doc**
* **This is a demonstration program – projects are encouraged to be innovative.**
* **Applicants should carefully read the RFP requirements and review the scoring sheet before drafting answers to ensure they are compliant and highlighting key areas.**
* **Applicants MUST submit separate applications if applying for more than one project type.**

1. **Project Applicant Information:** 
   1. Name of Organization:
   2. Organization Type

Units of Local Government Non-profit 501(c)(3) PHA

State Government Other: Describe

* 1. DUNS Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Sub-Recipient Organization(s) (fill out separately for each if applicable):** 
   1. Name of Organization:
   2. Organization Type

Units of Local Government Non-profit 501(c)(3) PHA

State Government Other: Describe

* 1. DUNS Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Contact person for this application:**
   1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 1: Project Type**

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| Which Project Type are you applying for?   * Rapid Rehousing (RRH): Tenant or Site-Based * Transitional Housing-Rapid Rehousing (TH-RRH) * Rapid Rehousing(RRH): Short Term Diversion Support * Support Services Only (SSO): Youth Housing Navigators * Support Services Only (SSO): Landlord Liaisons |

**Section 2. Experience of Applicant/Sponsor**

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| 1. Describe the experience of the project applicant, sub-recipients (if applicable) in performing activities similar to the activities that such organization is proposing to perform in response to this RFP. Describe ability to manage public (city, state, and/or federal) grants/contracts. Summarize ability to lead a collaborative project and coordinate and monitor multiple parties’ performance of services. |
| 1. (1) Does the applicant and/or potential subrecipients (if any) have experience administering a CoC program? YES / NO   (2) Does the applicant and/or potential subrecipients (if any) have experience serving youth or homeless youth (<25)  (3)Does the Applicant and/or potential subrecipients (if any) have experience coordinating a collaborative project? Name the project and briefly describe. |
| 1. Does the applicant and/or potential subrecipients (if any) currently participate in VT HMIS (ServicePoint, or Osnium, if applicable? YES / NO   If no: please describe data collection practices. |
| 1. Describe the basic organization and management structure of the applicant and sub-recipients (if any). Include description of internal and external coordination, structures for managing basic organization operations, and an adequate financial accounting system that will be used to administer the grant (including capacity to properly isolate and track YHDP-related income and expenditures (ensuring a thorough record of expenditures can be provided for purposes of an audit), the separation of duties/functions, and tracking staff time). Demonstrate how financial management systems in place are able to manage federal funding. |
| 1. Has the applicant or any subrecipients had a monitoring or audit of HUD homeless assistance programs in the last 12 months?   If yes, were there any findings from the audit?  Please describe.  Have all findings been resolved?  If yes, Attach a copy of close out letter.  If not, please attach a copy of the corrective action plan.  Are there any unresolved monitoring or audit findings for any other federal and/or state grants operated by the applicant or potential subrecipients (if any)? YES / NO  If Yes, describe the details of unresolved monitoring or audit findings and steps that will be taken to resolve. |
| 1. Have you returned any funds to HUD (or other federal government agency) or the state on any existing grants in the last two years? YES / NO   If yes, how much has been returned?  What is the reason that the funds have been returned?  What actions are you taking to ensure full spending? |
| 1. Do you have any outstanding obligation to HUD or the state that is in arrears or for which a payment schedule has not been agreed upon? YES / NO   If yes, how much is owed?  What is the reason for the obligation to HUD?  What is preventing establishing a payment schedule? |
| 1. (If applicable) Have you consistently drawn down funds at least quarterly on all HUD CoC grants in the last two years? YES / NO   What is the reason that the funds have not been drawn down?  What actions are you taking to ensure timely draw down? |
| 1. Have you submitted on time Annual Progress Reports (APRs) for all HUD CoC grants in the last two years? YES / NO     What is the reason that APRs were late?  What actions are you taking to ensure timely submission? |
| 1. Attachments: Submit 1 copy of the applicant’s two most recent annual financial statements prepared by an Independent Certified Public Accountant, and reviewed or audited in accordance with Generally Accepted Accounting Principles (GAAP) (USA). Each copy shall include all applicable financial statements, auditor's reports, management letters, and corresponding reissued components. **(This will be needed for final submission to HUD, applicants will not be scored based on these statements)** |

**Section 3: Project Narrative**

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| 1. Please describe your project in this section. Please begin with a summary and then address the items below.   *Please refer to the RFP and/or Coordinated Community Plan for detailed information about each category.* |
| Youth voice and collaboration:  Do you have a formal grievance policy in place? YES / NO  If no, please address how you will create one.  Please describe how youth voices were included in the planning for this project.  Please outline how youth voices will be included in program development, monitoring, assessment, and practice and policy development. |
| Describe specifically how the Project will meet the YHDP System Goal(s)   1. Continuum of Housing Supports 2. Permanent Connections 3. Social/Emotional Well-Being 4. Education/Employment 5. Prevention/Diversion |
| Identify the Populations to be served.  Eligibility:   1. Category 1 2. Category 2 3. Category 3 (10% of Funds) 4. Category 4   Describe any Target Population(s) or special outreach (LGBTQ, Pregnant & Parenting Youth, Unaccompanied Minors).  Projects serving minors must describe how different age groups, including young children of parenting youth, will be served within a project. |
| Describe the applicant and subrecipient(s) knowledge of and experience implementing the following principles:   1. A Right to Housing with No Preconditions 2. Youth Choice, Youth Voice, and Self-Determination 3. Positive Youth Development/Youth Thrive 4. Trauma Informed Care 5. Harm Reduction 6. Family Engagement 7. Individualized, Client-Driven Supports 8. Social Inclusion and Community Integration |
| Will you be able to meet all project requirements addressed in the RFP? YES / NO   * Coordinated Entry – help develop and participate in * Cultural inclusiveness policies and training * Work with DCF on projects serving unaccompanied minors * Employment supports and partnerships to serve youth and young adult, including parenting youth and young adults   If No, please address which ones in the narrative why, and how you plan to implement these project requirements quickly. |
| Waivers you may want to apply for \*Waivers will not be implemented on day one of the grant\* Please describe (if applicable) how you will implement project change when waivers are approved after the project has started. |
| Staffing – Briefly describe the staffing levels (#, type) and qualifications. Will you be creating a position for this project? Briefly describe how recruitment hiring will occur to enable activities to begin quickly after award. |

**Section 4: Project Scope and Implementation**

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| 1. Describe how the applicant shall, directly or indirectly through community partners or subcontractors, perform the “Administrator role” activities required by the RFP. Include in this description the titles (and names if already hired) of proposed personnel key to the success of the proposed program and the hours and percentages of time dedicated to this project. Describe their roles and responsibilities. |
| 1. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of work (quick inspections and payment processing). This should include a plan for **rapid implementation** of the program. Provide a summary of relevant contracts and agreements (e.g., with local providers, housing quality inspectors, other partner organizations) needed for the achievement of project operation. |

**Section 5: Budget**

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| HUD requires a ***minimum*** services match of at least 25% of CoC grant total from non-CoC sources. A Match letter must be on agency ***letterhead*** and signed by an ***authorized signer***. *Please see attached commitment match letter template for cash match and separately in-kind match.* |

1. Proposed Total Project Budget

*Applicants should strive to keep the Grant Administrative costs and Program Administrator costs under 10% of the budget.*

1. If providing leveraged resources, describe below.
2. Applicants are free to create their own budget form. Technical assistance is available to help understand eligible costs. Please be sure to create a budget for 2 years, including your 25% match and up to 10% grant administrative costs.
3. Additional information for Budgets

As outlined in 24 CFR 578.59, Grant Administrative Costs Include:

(1) General management, oversight, and coordination. Costs of overall program management, coordination, monitoring, and evaluation. These costs include, but are not limited to, necessary expenditures for the following:

(i) Salaries, wages, and related costs of the recipient‘s staff, the staff of sub-recipients, or other staff engaged in program administration. In charging costs to this category, the recipient may include the entire salary, wages, and related costs allocable to the program of each person whose primary responsibilities with regard to the program involve program administration assignments, or the pro rata share of the salary, wages, and related costs of each person whose job includes any program administration assignments. The recipient may use only one of these methods for each fiscal year grant.

Program administration assignments include the following:

(A) Preparing program budgets and schedules, and amendments to those budgets and schedules;

(B) Developing systems for assuring compliance with program requirements;

(C)Developing agreements with sub-recipients and contractors to carry out program activities;

(D)Monitoring program activities for progress and compliance with program requirements;

(E) Preparing reports and other documents directly related to the program for submission to HUD;

(F) Coordinating the resolution of audit and monitoring findings;

(G)Evaluating program results against stated objectives; and

(H)Managing or supervising persons whose primary responsibilities with regard to the program include such assignments as those described in paragraph (a)(1)(i)(A) through (G) of this section.

(ii) Travel costs incurred for monitoring of sub-recipients;

(iii) Administrative services performed under third-party contracts or agreements, including general legal services, accounting services, and audit services; and

(iv) Other costs for goods and services required for administration of the program, including rental or purchase of equipment, insurance, utilities, office supplies, and rental and maintenance (but not purchase) of office space.

(2) Training on Continuum of Care requirements. Costs of providing training on Continuum of Care requirements and attending HUD-sponsored Continuum of Care trainings.

(3) Environmental review. Costs of carrying out the environmental review responsibilities under § 578.31.

**HUD YHDP FAQs can be found here:** [**https://www.hudexchange.info/yhdp/faqs/**](https://www.hudexchange.info/yhdp/faqs/)