

2020 YOUTH HOMELESSNESS SERVICES (YHS)

PROPOSAL FORM

1. Applicant Name (Organization): _____
2. Project Name: _____
3. Please indicate the percentage of the requested funds that will serve the following age groups (total should add up to 100%):
 - ___ Age 18-24
 - ___ Age 12-17
 - ___ Age 6-11
 - ___ Age 0-5
4. Please indicate the percentage of the requested funds that will serve the following populations (total should add up to 100%):
 - ___ Unaccompanied homeless youth
 - ___ Children and youth in homeless families

HISTORY AND EXPERIENCE:

5. Provide an overview of your organization below, including a brief history, it's mission and purpose, and current activities (1500 character limit):

6. Describe, in detail, the services that your organization plans to provide using 2020 Youth Homelessness Services funding, including how these services will complement services that your organization provides through other funding. (4000 character limit)

7. How many years of experience does your organization providing services specifically to homeless youth? *Do not include services provided to broader populations (such as youth in general or homeless persons of all ages) in this calculation.*

- Less than one year
- One to five years
- Five to ten years
- More than ten years

8. Describe any similar populations (such as youth in general or homeless persons of all ages) that your organization serves, including the length of experience and types of services provided. (1000 character limit)

9. How many years of experience does your organization providing services in Tehama County?

- Less than one year
- One to five years
- Five to ten years
- More than ten years

SERVICE PROVISION APPROACH:

10. Describe your organization’s experience with and commitment to providing services using a **Low Barrier** approach. (1000 character limit)

11. Describe your organization's experience with and commitment to providing services using a **Housing First** approach. (1000 character limit)

12. Describe your organization's experience with and commitment to providing services using a **Positive Youth Development** approach. (1000 character limit)

13. Describe your organization's strategy for ensuring that staff has the requisite attitudes, knowledge and skills to deliver **culturally competent services**. Include specific examples of policies, staff training, challenges encountered, and how they were resolved. (1000 character limit)

MEASURABLE GOALS AND OBJECTIVES:

A **GOAL** is a broad statement of what you wish to accomplish.

Example: *Decrease homelessness among transitional age youth in Tehama County.*

OBJECTIVES represent toward accomplishing a goal. Objectives are concrete and measurable and should relate directly to a proposed activity.

Example: *Provide financial assistance with rental deposits for at least 15 unaccompanied transitional age youth.*

14. Describe 3 goals that your organization hopes to accomplish through the proposed activities and 2-3 specific, measureable objectives by which progress towards each goal can be measured.

GOAL 1:

Objectives:

GOAL 2:

Objectives:

GOAL 3:

Objectives:

15. COORDINATED ENTRY SYSEM (CES) PARTICIPATION

Select the response(s) that describe your organization's current CES participation:
(check all that apply)

- We refer individuals and families into the Tehama CES
- We fill openings in one or more of our housing programs from the Tehama CES Housing Needs List
- We refer individuals and families into the another community's CES
- We fill openings in one or more of our housing programs from the Housing Needs List in another community's CES
- We do not currently participate in any CES

16. HOMELESS MANAGEMENT INFORMATION SYSTEMS (HMIS) PARTICIPATION

Select the response(s) that describe your organization's current HMIS participation:
(check all that apply)

- We collect all HMIS Data Elements and enter into the Tehama HMIS
- We collect all HMIS Data Elements and enter into another community's HMIS
- We collect all HMIS Data Elements, but maintain the data in a non-HMIS database
- We do not collect HMIS Data Elements

17. COORDINATED COMMUNITY RESPONSE

Describe your history and experience in building and maintaining effective working relationships with community partners to ensure that participants in your services can be connected quickly and successfully to appropriate services provided by community partners. (1000 character limit)

FINANCIAL CAPABILITIES:

18. **Fund Accounting:** All funds awarded under this program must be maintained and accounted for separately and distinctly from other sources of funding. Describe your organization's policies and procedures that ensure funds are tracked appropriately. (1000 character limit)

19. **Internal Controls:** The Facility Operator must have internal controls in place to ensure that all funds are used solely for authorized purposes and to prevent misuse of funds through clear separations of fiscal duties. Does your organization currently have such internal controls in place?

- Yes. We have internal controls in place that fully address both areas.
- Not sure. We have internal controls in place that address these areas, but they may need to be reviewed and improved.
- No. We have no such internal control policies in place, but are willing to develop such policies if TCCoC can provide technical assistance.
- No. We have no such internal control policies in place and do not plan to instate such policies in the future.

20. How frequently does your organization undergo an external fiscal audit?

- Annually
- Every two years
- Every three to five years
- Another schedule: _____
- Never

21. In what year was your most recent external fiscal audit? _____

22. Please select the option that best describes your organization's annual operating budget:

- Less than \$200,000
 - Between \$200,000 and \$499,999
 - Between \$500,000 and \$999,999
 - Between \$1,000,000 and \$1,999,999
 - Between \$2,000,000 and \$3,999,999
 - Over \$4,000,000
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Please save and upload your completed
Proposal Form, Project Budget and Budget Narrative at:

<http://www.tehamacoc.org/yhs-submission-page>