2024 TEHAMA EMERGENCY SOUTIONS AND HOUSING (TESH)

PROPOSAL FORM

1. Applicant Name (Organization): _____

2. Project Name: _____

3. Amount Requested:_____

4. Please select the Project Type that applies to this project:

   Rental Assistance

   Interim Sheltering

   Street Outreach

5. Will this project serve a specific subpopulation of individuals and families experiencing homelessness?

   No, this project will serve the general population of persons experiencing homelessness.

   Yes. (Please describe target subpopulation): _____

   _____

HISTORY AND EXPERIENCE:

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

7. How many years of experience does your organization have providing services specifically to the target population?

    Less than one year

    One to five years

    Five to ten years

    More than ten years

8. Describe any similar populations (such as a specific subpopulation of persons experiencing homelessness, or families with very low incomes) 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

10. Describe your organization's history and experience in building and maintaining effective working relationships with community partners and participating in a coordinated community response. (1000 character limit)

NEED FOR PROJECT:

11. Describe the need for this particular project in Tehama County and how your organization avoids duplicating services offered by community partners. (2000 character limit)

PROJECT DESIGN:

12. Describe, in detail, the services that your organization plans to provide using 2024 Tehama Emergency Solutions and Housing funding, including how these services will complement services that your organization provides through other funding. (4000 character limit)

SERVICE PROVISION:

13. Describe your organization's experience with and commitment to providing services using **Housing First** and **Low Barrier** approaches. (2000 character limit)

14. 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)

15. Describe the project's strategies for ensuring that members of historically underserved or marginalized communities have equitable access to the services to be provided, are served in a manner that recognizes and addresses culturally-specific factors, and how the project monitors and assesses the effectiveness of these strategies. . (1500 character limit)

16. **FOR INTERIM SHELTERING PROJECTS ONLY** (Rental Assistance and Street Outreach projects, skip to Question 16.)

   a. Describe the bed and unit capacity of the Interim Sheltering project below, including breakdowns of beds/units by household type, gender, or any other categorization being utilized. For projects that utilize motel rooms to provide shelter, provide the typical number of beds/units in use at a given time and the projects maximum capacity. (1000 character limit)

b. Describe, in detail, the project's policy for prioritizing persons experiencing homelessness when the need for Interim Sheltering exceeds the project's caseload capacity. (1000 character limit)

17. TEHAMA COORDINATED ENTRY (TCE) PARTICIPATION:

   a. Select the response(s) that describe the project's <u>current</u> TCE participation: (check all that apply)

   ☐ We refer individuals and families into the TCE

   ☐ We use TCE to fill project caseload opening and/or shelter beds/units

   ☐ We do not currently participate in any CES

   b. Projects funded through the 2024 TESH RFP are required to participate TCE, with the specific level of participation based on project type, as described in the 2024 TESH RFP Section G.2. Please read Section G.2 of the RFP carefully, then check the applicable options below to confirm your commitment to TCE participation.

   ☐ The project will offer access to TCE assessments, either through direct entry of assessments into TCE or facilitating connection to TCE assessments for enrolled individuals through 2-1-1 Tehama.

   ☐ The project will utilize TCE to identify individuals and families for enrollment in services/shelter beds supported by funding available through this RFP.

   ☐ This project will not utilize TCE.

18. HOMELESS MANAGEMENT INFORMATION SYSTEMS (HMIS) PARTICIPATION

a. Select the response(s) that describe your organization's <u>current</u> HMIS participation:
(check all that apply)

   This project collects HMIS Data Elements on all individuals and households served and enters them into Tehama HMIS.

   This project exclusively serves survivors of domestic violence, sexual assualt and/or human trafficking who are experiencing homelessness due to victimization. We collect all HMIS Data Elements and enter into a HUD-compliant, HMIS-comparable database.

   This project does not currently collect HMIS Data Elements.

b. Projects funded through the 2024 TESH RFP are required to collect HMIS Data Elements and, except where prohibited by law, enter them into Tehama HMIS, as described in Section G.3 of the 2024 TESH RFP. Please read Section G.3 of the RFP carefully, then check the applicable option below to confirm your commitment to HMIS participation.

   This project will HMIS Data Elements on all individuals and households served and enters them into Tehama HMIS.

   This project exclusively serves survivors of domestic violence, sexual assault and/or human trafficking who are experiencing homelessness due to victimization and will collect all HMIS Data Elements and enter them into a HUD-compliant, HMIS-comparable database.

   This project will not collect HMIS Data Elements.

FINANCIAL CAPABILITIES:

19. **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)

20. **Expense Tracking and Expenditure Authorization Procedures:** Grantees must have established policies for ensuring that all expenditures are allowable and that funds are used responsibly. Describe the organization's/project's procedures for requesting and authorizing expenditures, ensuring that funds are used responsibly and that spending is kept within budget. (1000 character limit)

21. **Internal Controls:** Grantees 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 contol policies in place and do not plan to instate such policies in the future.

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

Annually

Every two years

Every three to five years

Another schedule: _____

Never

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

23. 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

Please save and upload your completed Proposal Form and Project Budget Form at:

http://www.tehamacoc.org/tesh-submission