**Mountainland Continuum of Care**

**Supplemental Application for CoC Renewal Funding**

This supplemental application is required for **each individual renewal project** and must be submitted by **11:59 pm October 19, 2015** to stephaniew@unitedwayuc.org. It must be submitted in PDF along with the items listed below.

Applicant Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DUNS #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check yes or no for the following:**

 Active registration in CCR/SAM: [ ]  Yes [ ]  No

We will limit our administrative request to 7% or less in the project renewal application: [ ]  Yes [ ]  No

Our agency has adopted a Housing First approach for this project: [ ]  Yes [ ]  No

Project services (check one):

[ ]  Transitional Housing

[ ]  Support Services Only

[ ]  Rapid Re-Housing

[ ]  Permanent Supportive Housing

**Required Attachments:**

[ ]  Most recent audit and response to any audit findings or most recent financial statement

[ ]  Most recent HUD monitoring report (if applicable)

[ ]  Most recent CoC/local monitoring report (if applicable) and any responses from your organization

[ ]  Spreadsheet showing LOCCS drawdowns of project funds for 2013 and 2014 HUD contracts (PDF or excel)

[ ]  Nonprofit letter of determination (if private nonprofit)

[ ]  Most recent APR (Annual Progress Report). Please submit a PDF of the APR submitted to HUD and NOT the APR report from HMIS.

**Did your agency need to address any compliance issues that resulted in conditions that needed to be addressed prior to receiving the most current HUD contract for this renewal project?** **[ ]  Yes** **[ ]  No If yes, please briefly describe the compliance issue, the condition and your response.**

**Please provide the following from your most recently submitted APR for this project (where applicable):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Performance Measure** | **Target # of persons** | **Target % of persons expected to accomplish this measure** | **Actual # of persons served as applicable to this measure** | **Actual % of persons who accomplished this measure** | **% difference between target and actual performance** |
| Housing stability |  |  |  |  |  |
| Increase total income  |  |  |  |  |  |
| Increase earned income  |  |  |  |  |  |
| Increased total income |  |  |  |  |  |

**Brief description of level of participation in Mountainland Continuum of Care:**

**Brief description of participation in Utah HMIS:**

Not applicable if prohibited by law i.e. domestic violence service providers.

**Matching funds/in-kind:**

Please provide the source and amount of match for the project (please be specific).

***Opening Doors***

HUD’s *Opening Doors* is centered on the belief that “no one should experience homelessness, no one should be without a safe, stable place to call home.” The amended Plan remains focused on four key goals (1) Prevent and end homelessness among Veterans in 2015; (2) Finish the job of ending chronic homelessness in 2017; (3) Prevent and end homelessness for families, youth, and children in 2020; and (4) Set a path to end all types of homelessness.

Please check below the population(s) which is targeted by your project:

[ ]  Veterans

[ ]  Chronic homeless persons

[ ]  Families with children

[ ]  Youth (ages 18-24)