

Application VIII, Hotel/Motel Voucher

Funds may be used for costs of providing homeless families and individuals with temporary shelter in hotels and motels for the duration of thirty days and associated case management. First and foremost, applicants must demonstrate that NO OTHER APPROPRIATE shelter is available to serve the proposed populations. Further note that all households must be connected to a permanent housing project with a goal of moving from the hotel/motel to permanent housing within 30 days.

Applicants may apply for up to \$40,000 in funding.

Project Information and Background

Applicant (Agency) Legal Name

HMIS Agency Key

Contact Person

Contact Person Phone

Contact Person Email

*(Current) HMIS Project Name

*(Current) HMIS Project Key

*Please note that project name and key referenced here will be used by DCA in all future correspondence if grant is awarded. If this is a new project please indicate by entering "new" for the Project Key.

List Primary Site Name(s) to be Utilized for Project:

Name:

Name:

Name:

HUD Local Consolidated Plan Certification of Consistency for this project attached from:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Albany | <input type="checkbox"/> Cobb County | <input type="checkbox"/> Gainesville | <input type="checkbox"/> Sandy Springs |
| <input type="checkbox"/> Athens-Clarke | (including Marietta) | <input type="checkbox"/> Gwinnett County | <input type="checkbox"/> Savannah |
| <input type="checkbox"/> Atlanta | <input type="checkbox"/> Columbus- | <input type="checkbox"/> Henry County | <input type="checkbox"/> Valdosta |
| <input type="checkbox"/> Augusta- | Muscogee | <input type="checkbox"/> Hinesville | <input type="checkbox"/> Warner Robins |
| <input type="checkbox"/> Richmond | <input type="checkbox"/> Dalton | <input type="checkbox"/> Johns Creek | |
| <input type="checkbox"/> Brunswick | <input type="checkbox"/> DeKalb County | <input type="checkbox"/> Macon Bibb | |
| <input type="checkbox"/> Cherokee County | <input type="checkbox"/> Fulton County | County | <input type="checkbox"/> Not Applicable – |
| <input type="checkbox"/> Clayton County | (including Roswell) | <input type="checkbox"/> Rome | Balance of State |

Does this project exclusively serve victims of domestic violence? Yes No

Which type of homeless intervention is this project associated with?

- Rapid Re-Housing
 Outreach
 Other, please describe:

Check all the counties that will have access to services offered by this project:

- | | | | | |
|--|------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Appling | <input type="checkbox"/> Cobb | <input type="checkbox"/> Grady | <input type="checkbox"/> McDuffie | <input type="checkbox"/> Sumter |
| <input type="checkbox"/> Atkinson | <input type="checkbox"/> Coffee | <input type="checkbox"/> Greene | <input type="checkbox"/> McIntosh | <input type="checkbox"/> Talbot |
| <input type="checkbox"/> Bacon | <input type="checkbox"/> Colquitt | <input type="checkbox"/> Gwinnett | <input type="checkbox"/> Meriwether | <input type="checkbox"/> Taliaferro |
| <input type="checkbox"/> Baker | <input type="checkbox"/> Columbia | <input type="checkbox"/> Habersham | <input type="checkbox"/> Miller | <input type="checkbox"/> Tattnall |
| <input type="checkbox"/> Baldwin | <input type="checkbox"/> Cook | <input type="checkbox"/> Hall | <input type="checkbox"/> Mitchell | <input type="checkbox"/> Taylor |
| <input type="checkbox"/> Banks | <input type="checkbox"/> Coweta | <input type="checkbox"/> Hancock | <input type="checkbox"/> Monroe | <input type="checkbox"/> Telfair |
| <input type="checkbox"/> Barrow | <input type="checkbox"/> Crawford | <input type="checkbox"/> Haralson | <input type="checkbox"/> Montgomery | <input type="checkbox"/> Terrell |
| <input type="checkbox"/> Bartow | <input type="checkbox"/> Crisp | <input type="checkbox"/> Harris | <input type="checkbox"/> Morgan | <input type="checkbox"/> Thomas |
| <input type="checkbox"/> Ben Hill | <input type="checkbox"/> Dade | <input type="checkbox"/> Hart | <input type="checkbox"/> Murray | <input type="checkbox"/> Tift |
| <input type="checkbox"/> Berrien | <input type="checkbox"/> Dawson | <input type="checkbox"/> Heard | <input type="checkbox"/> Muscogee | <input type="checkbox"/> Toombs |
| <input type="checkbox"/> Bibb | <input type="checkbox"/> Decatur | <input type="checkbox"/> Henry | <input type="checkbox"/> Newton | <input type="checkbox"/> Towns |
| <input type="checkbox"/> Bleckley | <input type="checkbox"/> DeKalb | <input type="checkbox"/> Houston | <input type="checkbox"/> Oconee | <input type="checkbox"/> Treutlen |
| <input type="checkbox"/> Brantley | <input type="checkbox"/> Dodge | <input type="checkbox"/> Irwin | <input type="checkbox"/> Oglethorpe | <input type="checkbox"/> Troup |
| <input type="checkbox"/> Brooks | <input type="checkbox"/> Dooly | <input type="checkbox"/> Jackson | <input type="checkbox"/> Paulding | <input type="checkbox"/> Turner |
| <input type="checkbox"/> Bryan | <input type="checkbox"/> Dougherty | <input type="checkbox"/> Jasper | <input type="checkbox"/> Peach | <input type="checkbox"/> Twiggs |
| <input type="checkbox"/> Bulloch | <input type="checkbox"/> Douglas | <input type="checkbox"/> Jeff Davis | <input type="checkbox"/> Pickens | <input type="checkbox"/> Union |
| <input type="checkbox"/> Burke | <input type="checkbox"/> Early | <input type="checkbox"/> Jefferson | <input type="checkbox"/> Pierce | <input type="checkbox"/> Upson |
| <input type="checkbox"/> Butts | <input type="checkbox"/> Echols | <input type="checkbox"/> Jenkins | <input type="checkbox"/> Pike | <input type="checkbox"/> Walker |
| <input type="checkbox"/> Calhoun | <input type="checkbox"/> Effingham | <input type="checkbox"/> Johnson | <input type="checkbox"/> Polk | <input type="checkbox"/> Walton |
| <input type="checkbox"/> Camden | <input type="checkbox"/> Elbert | <input type="checkbox"/> Jones | <input type="checkbox"/> Pulaski | <input type="checkbox"/> Ware |
| <input type="checkbox"/> Candler | <input type="checkbox"/> Emanuel | <input type="checkbox"/> Lamar | <input type="checkbox"/> Putnam | <input type="checkbox"/> Warren |
| <input type="checkbox"/> Carroll | <input type="checkbox"/> Evans | <input type="checkbox"/> Lanier | <input type="checkbox"/> Quitman | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Catoosa | <input type="checkbox"/> Fannin | <input type="checkbox"/> Laurens | <input type="checkbox"/> Rabun | <input type="checkbox"/> Wayne |
| <input type="checkbox"/> Charlton | <input type="checkbox"/> Fayette | <input type="checkbox"/> Lee | <input type="checkbox"/> Randolph | <input type="checkbox"/> Webster |
| <input type="checkbox"/> Chatham | <input type="checkbox"/> Floyd | <input type="checkbox"/> Liberty | <input type="checkbox"/> Richmond | <input type="checkbox"/> Wheeler |
| <input type="checkbox"/> Chattahoochee | <input type="checkbox"/> Forsyth | <input type="checkbox"/> Lincoln | <input type="checkbox"/> Rockdale | <input type="checkbox"/> White |
| <input type="checkbox"/> Chattooga | <input type="checkbox"/> Franklin | <input type="checkbox"/> Long | <input type="checkbox"/> Schley | <input type="checkbox"/> Whitfield |
| <input type="checkbox"/> Cherokee | <input type="checkbox"/> Fulton | <input type="checkbox"/> Lowndes | <input type="checkbox"/> Screven | <input type="checkbox"/> Wilcox |
| <input type="checkbox"/> Clarke | <input type="checkbox"/> Gilmer | <input type="checkbox"/> Lumpkin | <input type="checkbox"/> Seminole | <input type="checkbox"/> Wilkes |
| <input type="checkbox"/> Clay | <input type="checkbox"/> Glascock | <input type="checkbox"/> Macon | <input type="checkbox"/> Spalding | <input type="checkbox"/> Wilkinson |
| <input type="checkbox"/> Clayton | <input type="checkbox"/> Glynn | <input type="checkbox"/> Madison | <input type="checkbox"/> Stephens | <input type="checkbox"/> Worth |
| <input type="checkbox"/> Clinch | <input type="checkbox"/> Gordon | <input type="checkbox"/> Marion | <input type="checkbox"/> Stewart | |

1. Total PROJECTED Served Annually (Project)

Number of Project Beneficiaries served from 7/1/2016 through 6/30/2017

(Please note: If funded, this number will be referenced later to determine project progress.)

Individuals	
Number of families	
Average family size	
Number of persons in families	
Total unduplicated persons (12 months) assisted	
Total households assisted*	

Generally, households assisted = individuals + number of families. However, multiple individuals can be assisted in a single household (unrelated roommates). Less likely, but possible: multiple families can be assisted in a single household.

2. Homeless Need

Describe **HOMELESS** need in your area. Utilize DCA Homeless Count Report and Continuum of Care bed data, including the number of sheltered and unsheltered homeless families and individuals.

3. Describe how/why there is no other appropriate shelter in the service area for the intended population.

4. PROJECT DESIGN

Describe relationships or agreements with specific hotels or motels established for this project. List which businesses you plan to utilize for this project and why you chose those hotels/motels.

5. Entry Requirements

a. Does the project ensure that participants are not screened out for service? Yes No
Describe policy.

b. Are participants required to have income for entry? Yes No
Describe your policy supporting this.

c. Are participants screened out for active substance abuse? Yes No
Describe your policy supporting this.

i. Do you conduct drug or alcohol testing at entry? Yes No.

ii. Does a positive drug or alcohol test keep a participant out of the program? Yes No

- d. Are participants required to have a criminal background check for entry? Yes No
Describe policy:

- e. Does having a criminal record (with exceptions for state-mandated restrictions) prohibit a referral from entering the project? Yes No
Describe your policy supporting this.

- f. Does a history of domestic violence (e.g. lack of a protective order, period of separation from abuser, or law enforcement involvement) prohibit someone from entering the project? Yes No
Describe your policy supporting this.

- g. Does the project ensure that participants are not terminated from the program for the following reasons?
(check all that apply)

- Failure to participate in supportive services
- Failure to follow the individual service plan
- Failure to make progress on a service plan
- Loss of income or failure to improve income
- Being a victim of domestic violence

6. Targeted Populations

Describe populations targeted and how your organization will reach these populations and verify homelessness.

7. Eligibility Requirements

Briefly discuss eligibility requirements including intake processes, requirements for clients upon entering project, etc.

8. Reasonable Accommodations

Describe access for persons with disabilities and list any reasonable accommodations the project provides to ensure that prospective clients with a wide range of needs can be served.

- h. Briefly discuss other rules, requirements of participants not previously mentioned, reasons for dismissal, termination/eviction processes, appeal procedures, etc.

CASE MANAGEMENT AND STABLE HOUSING

9. Case Management

Does the applicant develop goals and a personalized, formal plan for participants? Discuss how supportive services are provided to shelter participants (on site, off site, other agencies involved, etc.).

This project does not provide case management

i. Housing Support Standards

If awarded funding, do you agree to incorporate the elements of the Housing Support Standards in your case management structure? Yes No

Do you agree to conduct the Barriers to Housing Stability Assessment for heads of households for EACH household served by this project?

Yes No

If no, please explain.

Housing Support Standards, Continued

If your project received DCA funding in the past year, describe how your agency is implementing the Housing Support Standards:

10. Stable Housing Performance Measures

Describe how this project connects participants to permanent housing options. Describe relationships with partners and list all housing options available to participants including the name of the agency and specific project and if a formal Memorandum of Agreement (MOA) exists. Explain how the transition can be made within 30 days of project enrollment.

11. Employment Assistance

Are participants in applicant's project generally required or expected to obtain a job if they are not currently employed?

Yes No

If yes, what time frame?

12. Mainstream Benefits

Describe the efforts your project makes to connect participants with mainstream benefits. If benefits support is provided by a 3rd party, please describe. Include a formal Memorandum of Agreement in application upload if a 3rd party is used.

This project does not provide

13. Staffing

What is the TOTAL number of staff and/or volunteers utilized for this project?

List staff employed by your agency to work in this project by position (house managers, case managers, etc.). Check the box that describes their employment status, and describe their duties and qualifications as relevant.

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

Position:
Employment status: **Full-time or equivalent** **Part-time** **Volunteer**
Duties:

HOMELESS MANAGEMENT INFORMATION SYSTEMS

14. DV Comparable Database (DOMESTIC VIOLENCE PROJECTS ONLY)

Are you currently using a DV comparable database to track participants served by this project?

Yes No

j. Homeless Management Information System (HMIS) (NON-DOMESTIC VIOLENCE AGENCIES)

If you are a first-time applicant for DCA funds, please answer the following questions:

Does your agency currently use Pathways HMIS?

Yes No N/A

If you are not a family violence agency and you selected “No,” explain why you aren’t currently using Pathways HMIS, and describe your plan for using Pathways to implement this project.

MATCHING

15. Match Sources

A 100% match is required. The applicant may include the value of any donated material or building, the value of any lease on a building, any salary paid to staff to carry out the project of the recipient, and the value of the time and services contributed by volunteers to carry out the project according to guidance provided by DCA in the application guidelines. Discuss match sources.

k. Other Cash and Matching Resources Available for Hotel/Motel Project

A 100% match is required. The matching requirement may be met by one or both of the following:

(1) *Cash contributions.*

(2) *Noncash contributions.* The value of any real property, equipment, goods, or services contributed to the grantee’s ESG project, provided that if the grantee had to pay for them with grant funds, the costs would have been allowable. Noncash contributions may also include the purchase value of any donated building.

o *Calculating the amount of non-cash contributions.*

(1) To determine the value of any donated material or building, or of any lease, the grantee must use and document a method reasonably calculated to establish the fair market value.

(2) Services provided by individuals must be valued at rates consistent with those ordinarily paid for similar work in the grantee’s organization. If the grantee does not have employees performing similar work, the rates must be consistent with those ordinarily paid by other employers for similar work in the same labor market.

(3) Some noncash contributions are real property, equipment, goods, or services that, if the grantee had to pay for them with grant funds, the payments would have been indirect costs. Matching credit for these contributions must be given only if the grantee has established, along with its regular indirect cost rate, a special rate for allocating to individual projects or projects the value of those contributions.

DCA will verify these amounts for compliance!

Be realistic and be prepared to provide verification if funds are awarded!

<u>Funds Provided for THIS PROJECT ONLY!</u> Funds otherwise provided to the agency may not be included!	<u>Project Name</u>	<u>Amount - Use * to indicate cash</u>
Department of Community Affairs	ESG	
Department of Housing and Urban Development	SHP	
Local Government (City)		
Local Government (County)		
GA Department of Human Services		
GA Dept. BH & DD		
Other State Agency		
United Way		
Faith Based Organizations		
Foundations		
Fundraising Events		
In-kind Professional Services		
Cash Donations		
Volunteer Services		
Donations		
Participant Fees		
Other		
Total (Include Additional Pages if Necessary)		

16. Budget

Provide a **COMPLETE** budget below. Include all matching funds in Column b. **whether you are seeking DCA funding for that category or not.**

<u>Hotel/Motel Voucher Project Budget (Continued)</u> <u>Item</u>	<u>a. ESG Request (Cash Only!)</u>	<u>b. Matching Funds(may be non-cash)</u>	<u>c. Total Budget</u>
Personnel:			
1. Salaries			
2. Travel			
3. Matching, Name:			
4. Matching, Name:			
Client Assistance (appropriate for project):			
5. Hotel / Motel Payments			
6. Transportation (to move into housing)			
7. Matching, Name:			
8. Matching, Name:			
1. <u>TOTAL EXPENSES</u>			
		<u>This column must meet or exceed Column a. to document the 100% match requirement</u>	
*Note that matching funds by source must be disclosed. If this project is approved for ESG funds, DCA may, at its sole discretion, choose not to participate in all “proposed” cost items.			

Budget Guidance

- a. Personnel. The cost of arranging and coordinating, the move of project participants into a hotel/motel is eligible. Component services and activities consist of: (A) Conducting the initial evaluation, including verifying and documenting eligibility; (B) Counseling; (C) Developing, securing, and coordinating housing resources for project participants; (D) Monitoring and evaluating project participant progress; (E) Providing information and referrals to other providers; (F) Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and (G) Developing an individualized housing and service plan, including planning a path to permanent housing stability.
- b. Client Assistance. The costs of hotel/motel stays up to 30 days per household are eligible, including the cost of transportation necessary to move a household into the hotel/motel.