

Project Information - Page 1

Instructions:

Select the appropriate Continuum of Care (CoC) name and number from the drop-down menu. The system will auto-populate the "Project Name" field.

Identify the appropriate "Project Type" from the drop-down menu (new or renewal project). Renewal projects are defined as those HUD McKinney-Vento grants that have received prior funding and are eligible to renew during the current competition.

Identify the project's "Program Type" and "Component Type." These selections must be made in the order of appearance (i.e. component type cannot be selected before selecting program type or project type). Depending on the program type selected, indicate the appropriate component type for the project.

Select the state(s) and the congressional district(s) in which the project is located. This information will be used to list the available geography codes on the next screen, and to send correspondence to the appropriate Congressional Representative(s).

In the last field on this form, provide a general description of the project. The description should include information on the homeless needs that are addressed by the project, the type of housing and number of units being proposed, and the target population that the project will serve. This information is required of all new and renewal projects. Rapid Re-housing projects must review the detailed instructions attached to the left menu and must reference the 2008 NOFA for detailed program requirements. Additional program requirements for all project types are also available at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements. As well, additional training for completing this page is available online at: <http://esnaps.hudhre.info/training>.

The following fields must be completed for every project application.

CoC Number and Name NY-511 - Binghamton/Union Town/Broome County CoC

Project Name VOA Permanent Housing for Chronically Homeless

Project Type New Project

Program Type
Content depends on "Project Type" selection

Component Type
Content depends on "Program Type" selection

In which state is the project located? New York
(for multiple state selections hold CTRL+Key)

In which Congressional District(s) is the project located? NY-022
(for multiple selections hold CTRL + Key)

Provide a general description of the project.
(Max 3000 characters)

Volunteers of America of Western New York (VOA) is requesting HUD Supportive Housing Program funds to create 12 new units of permanent housing for chronically homeless adults in Binghamton, New York. The units are studio apartments located in VOA's residential facility at 320 Chenango Street in Binghamton, and each one has a kitchenette and private bathroom with shower. VOA's program will provide chronically homeless individuals with permanent housing in a safe, accessible facility with 24-hour supervision and support services that will help residents remain stabilized in permanent housing, enhance their quality of life, and avoid a return to homelessness. The population to be served by VOA's permanent housing will be chronically homeless adults with a diagnosable substance abuse disorder and/or serious mental illness. Residents will range in age from 18 to over 60 years old, with a median age in the mid-thirties. Case management services, including recovery support, lifeskills training, monitoring and intervention will be provided by VOA at its facility by an on-site case manager. VOA will work with other agencies to arrange drug & alcohol treatment, mental health services, and health care for clients. Permanent supportive housing for the chronically homeless is a much-needed service in Binghamton and will help to fill a substantial gap in the local Continuum of Care. VOA's Permanent Housing Program will achieve the following outcomes:

- * 75% of residents will remain stabilized in permanent housing for at least 6 months.
- * At least 18% of homeless persons will be employed upon exit from the permanent housing program.
- * 70% of residents will stay active in their recovery and maintain a clean & sober lifestyle for at least one year.
- * 10% of residents will participate in continuing education (i.e. GED, literacy program, etc.)

Project Information - Page 2

Instructions:

New projects:

There are two types of special housing projects for the 2008 competition, Samaritan Housing and Rapid Re-Housing. All new SHP-PH, SHP-TH, S+C, and Section 8 SRO projects must identify whether or not special housing funds are being requested. Only new SHP-PH, S+C, and Section 8 SRO projects may request Samaritan Housing funds. Rapid Re-housing funds can be requested by new SHP-TH projects only.

Renewal projects:

Indicate whether or not the project previously received funds under the Samaritan Housing Initiative. If the project received Samaritan funds, the project must continue to meet the requirements of the initiative for the life of the project. Renewal SHP projects must also indicate whether or not it is a consolidated grant. All grant consolidations must be HUD approved prior to application submission. Each consolidated grant must be listed on the "Grant Consolidation" page.

New and renewal projects:

Indicate whether or not the project is:

- using Energy Star;
- located in a rural area (reference the definition in 2008 NOFA before answering this question); and
- located on land previously owned by the military.

All new and renewal projects must also indicate the geographic area(s) that will be served by the project.

Budget Activities:

All SHP projects must identify the budget activities being requested for the project. Depending on the project type, these budget activities may include acquisition, new construction, rehabilitation, leasing (units or structures), supportive services, operations, and/or HMIS. All S+C and Section 8 SRO projects must only complete the rental assistance budget and the estimated development cost budget, if applicable.

For additional instructions and examples on completing this form, reference the detailed instructions document on the left menu and the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

The following fields must be completed for every project application.

Is the project requesting funding under a Special Initiative? Yes
Select the "Save" button to identify Rapid Re-housing or Samaritan Housing

Special Initiative Applicable: Samaritan Housing

Grant Term 3 Years

NOTE: New projects must be 2 or 3 years, except new HMIS projects and new hold harmless reallocation projects, which can be 1, 2 or 3 years.

Does the project use Energy Star? Yes

Is the project located in a rural area? No

Is the project located on land previously owned by the military? No

***Select all applicable budget activities that the project is requesting:**

New Construction

Acquisition	<input type="checkbox"/>
Rehabilitation	<input type="checkbox"/>
Leasing	<input type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operations	<input checked="" type="checkbox"/>
HMIS	<input type="checkbox"/>

Project Location(s)

The following list summarizes the project location(s) that have been entered. To add a location to this list, click on the  symbol.

Location Name	Street Address 1	Street Address 2	City	State	Zip
Volunteers of Ame...	320 Chenango Street	--	Binghamton	New York	13901

Project Location Detail

Instructions:

Location Name (Optional - except for SRA project): Identify the name of the location(s) being used for housing project participants. If the project includes leased or rental units in more than 4 locations, only enter "Scattered Site" in this field. All other project types should enter the name of the project location in this field.

Project Ownership (Required): Indicate whether the location (including all scattered sites locations) is owned or leased by the applicant, sponsor, or a parent organization. If the project contains units that house project participants using SHP funds, under no circumstances may SHP leasing funds be used to lease units or structures owned by the grantee (the applicant), the project sponsor, or the parent organization(s) of either entity.

Location Address (Optional - except for SRA project): Indicate the Street Address, City, State, and Zip Code of the units being used for housing project participants. If the project includes leased or rental units in more than 4 locations, enter the address of the project sponsor in these fields.

For additional instructions and examples related to completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>.

Enter the physical address of the project and indicate the ownership of the location. Scattered site projects should refer to the instructions for details on completing the field on this screen.

Location Name Volunteers of America's Permanent Housing for Chronically Homeless

Property Ownership Own

Street Address 1 320 Chenango Street

Street Address 2

City Binghamton

State New York

Zip Code 13901

Format: (12345 or 12345-1234)

Project Expansion Information

Instructions:

Expansion projects - identify and describe the expansion of an existing facility or activities being proposed. Projects may only expand facilities that are currently operating and activities that are currently undertaking, to include one or more of the five (5) activities listed. For additional guidance on expanding existing facilities and/or activities, contact the local HUD Field Office: <http://www.hud.gov/offices/cpd/about/local/index.cfm>.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

The following fields relate to new projects that plan to expand one or more existing housing facilities or service activities currently being provided.

Will the project use an existing homeless facility or incorporate activities provided by an existing project? No
(if yes, select the "Save" button to identify the expansion activities)

Project Sponsor Information

Instructions:

The project sponsor is usually the entity that will be carrying out the project. If the sponsor is the same entity as the project applicant, select "yes" in the first drop-down box and enter "save" at the bottom of the page, and the system will auto-populate the fields on this form based on the information entered in the SF-424. Simply verify that the correct information has been populated. If the information is incorrect, correct the applicant information on the SF-424.

If the project sponsor and applicant are separate entities, manually enter the information for the project sponsor. All non-profit sponsors will need to attach proper documentation to verify their non-profit status, if the documentation is not attached to the SF 424. All projects can identify only one sponsor. If multiple sponsors have been identified on past funding applications, the project applicant must identify a "lead" sponsor.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Complete the following fields to identify the project sponsor, including its legal name, type of organization, DUNS number, employer/taxpayer number, and physical address.

Is the project applicant the same as the project sponsor? Yes
(If yes select the "Save" button to auto-fill the fields below)

Organization Name Volunteers of America of Western New York, Inc.

Organization Type M. Nonprofit with 501(c)(3) IRS Status (Other than Institution of Higher Education)

If "Other" specify:

DUNS Number 825036361
Format: xxxxxxxxx or xxxxxxxxxxxxxx

Tax ID or EIN 16-6011713
Format: 12-3456789

Street Address 1 214 Lake Avenue

Street Address 2

City Rochester

State New York

Zip Code 14608
Format: 12345 or 12345-1234

Is the sponsor a Faith-Based Organization? Yes

Has the sponsor ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

Non-Profit Documentation Attachment Detail

Document Description:

Project Sponsor Contact Information

Instructions:

The project sponsor is usually the entity that will be carrying out the project. If the sponsor is the same entity as the project applicant, the system will auto-populate the fields on this form based on the information entered in the SF-424. Simply verify that the correct information has been populated. If the information is incorrect, correct the applicant information on the SF-424.

If the project sponsor and applicant are separate entities, manually enter the information for the project sponsor. All non-profit sponsors will need to attach proper documentation to verify their non-profit status, if the documentation is not attached to the SF 424. All projects can identify only one sponsor. If multiple sponsors have been identified on past funding applications, the project applicant must identify a "lead" sponsor.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Provide the name and contact information of the person to be contacted for matters regarding project operations. If the sponsor is the same entity as the applicant, the system will auto-populate the fields below.

Prefix

First Name Patricia

Middle Name A.

Last Name Drake

Suffix

Title Vice President of Development

E-mail Address pdrake@voawny.org

Confirm E-mail Address pdrake@voawny.org

Phone Number 585-402-7211
Format: 123-456-7890

Extension 7211

Fax Number 585-647-2177
Format: 123-456-7890

Experience of Project Applicant, Sponsor, and Partners

Instructions:

The purpose of this screen is to determine the ability of the project partners to operate and carry-out the housing and/or supportive service activities of the project.

All projects - describe the specific type and length of experience for the applicant, project sponsor, housing and supportive service providers, and if applicable, key subcontractors involved in implementing the project. In addition, describe the experience in working with homeless persons, and the experience directly related to the proposed activities being carried out, including housing development, housing management, housing families (especially for Rapid Re-housing projects), service delivery, and HMIS activities (for new HMIS projects).

Rapid Re-housing projects - must also describe specific experience serving homeless households with dependent children and include a description of the performance for previous Rapid Re-housing for Families and/or households with dependent children projects. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>.

Describe how the project applicant, sponsor, and partners meet the experience standards outlined in the NOFA.

Describe experience of project partners related to providing activities and working with homeless persons.

Volunteers of America of Western New York (VOA) has more than 20 years of experience providing supportive housing programs that are designed to help individuals break the cycles of homelessness, addiction, poverty, and criminal behavior. VOA employs a diverse staff of program supervisors, case managers, case aides, and public safety officers who have experience working with special populations, including individuals who are homeless, chemically addicted, HIV/AIDS infected, mentally ill, MICA, veterans, parolees, and/or victims of domestic violence. VOA owns and maintains safe, clean housing units that are easily accessible to those in need and are located close to public transportation and other service providers. Currently, VOA offers a wide range of programs, most of which are licensed, funded or contracted through local, state and/or federal agencies. They include:

* Community Residence: Licensed by NYS OASAS since 1993, serving 20 clients daily.

* SRO Housing: Funded by NYS Office of Temporary & Disability Assistance since 1990, serving 80 clients daily.

* Emergency Housing: In operation and receiving funds from county Dept. of Human Services since 1987; VOA serves 54 individuals & 17 families a day.

* Homelessness Intervention Program: Funded by HUD from 1998-2003; Funded by NYS OTDA since 2003; serves more than 200 people a year.

* Permanent Housing: HHAP funded in 1991 to create 10 units of permanent housing for homeless families in Binghamton, NY.

* Residential Re-Entry: Re-entry program funded through the U.S. Bureau of Prisons since 1997, serving 50 clients daily.

VOA's Residential Re-Entry Program and our Children's Center in Rochester are both nationally accredited programs. VOA is able to administer all of the financial and programmatic aspects of the above programs and has a history of successfully providing the services outlined in its contracts. This record is evidence of VOA's ability, with appropriate funding, to provide effective programs that help clients -- especially "hard-to-serve" clients with disabling conditions-- move to and eventually achieve healthy, self-sufficient lives.

Are there any unresolved monitoring or audit findings on HUD McKinney-Vento Act grants, excluding ESG? No
(If yes, select the "Save" button to explain findings)

Special Housing Project

All new projects requesting special housing funds (Samaritan Housing or Rapid Re-housing for Families) must address all mandatory fields below. It is imperative that applicants carefully review the 2008 NOFA for program eligibility requirements.

How will the project address the specific case management needs of chronically homeless participants?

Volunteers of America of Western New York (VOA) has extensive expertise in planning and implementing stable, high-quality programs for populations who would otherwise end up back on the street or in more expensive, institutional settings including prison or public health facilities. In addition, VOA has experience working with "difficult to serve" individuals, especially those with mental illness and/or substance abuse disorders, who have been evicted or turned out of other programs. VOA is proposing to serve chronically homeless individuals with a disabling condition, specifically individuals with a diagnosable substance abuse disorder and/or serious mental illness. VOA will evaluate each client individually and develop a plan of support services based on where that client is and where he needs to be to successfully live in permanent housing. Needs will vary widely, depending on the client. Clients with a substance abuse disorder will need ongoing treatment, recovery support, after-care programs, and connections to support groups. In addition, MICA clients will need to have mental health assessments and appropriate treatment arranged. VOA already has well-established working relationships with treatment centers and mental health providers who have committed to serving individuals living in our new permanent housing program. VOA will arrange mental health counseling and addiction treatment with these service agencies, and initially VOA will transport clients to these providers to ensure they attend sessions. VOA will also provide counseling, case management, recovery support, and monitoring on-site. It is VOA's expectation that clients may relapse initially, but they will not be discharged from the program. VOA's staff will work with residents to get them back on track. Residents will not be allowed to relapse indefinitely, but it is VOA's experience that individuals with a history of homelessness and addiction will need time to develop a clean and sober lifestyle. Because VOA's proposed program will provide permanent housing with no time limits on a resident's stay, VOA's staff will have the opportunity to help residents develop structure, responsibility, accountability, coping mechanisms, positive behaviors and support systems over a long period of time, improving the clients' ability to maintain housing and avoid a return to homelessness.

**Describe the contingency plan that the project will implement if the project experiences difficulty in meeting the 100% chronically homeless requirement for Samaritan Housing projects.
(This may include re-evaluating the intake assessment procedures or outreach plan.)**

The Broome County Continuum of Care's Point-in-Time assessment determined there were at least 182 homeless adults without dependent children, and of these adults:

- * 66 were chronically homeless
- * 67 were mentally ill
- * 123 had chronic substance abuse issues.

Based on these statistics and information from the Department of Social Services and local emergency shelters, the Continuum has determined that there is a significant need for permanent housing for chronically homeless adults and has made it a strategic priority. VOA's discussions with the local Homeless Coalition and the Continuum of Care indicate there will be no difficulty in meeting the 100% chronically homeless requirement for the 12-unit program we're proposing to create. In addition, VOA will be using a "housing first" model for this program. Initially, residents will be asked to adhere to very general guidelines --which they will help determine -- to ensure a safe, respectful living environment for all residents. There will not be an extensive list of house rules, because too much structure and discipline has caused these individuals to drop out of emergency/transitional housing programs and return to homelessness. For example, residents will not have a curfew (since this is permanent housing), but VOA will ask residents to determine quiet hours and adhere to them so that all residents can enjoy their apartments and sleep without disturbances. VOA will provide 24-hour supervision and support via Public Safety Officers who will be on site seven days a week. The PSOs will assist clients with questions and problems, but they will not monitor the residents comings and goings. Residents will have keys to the entrance door as well as their own apartments. The PSOs' primary responsibility will be to ensure the safety and security of the residents and the facility. VOA has met with chronically homeless individuals to obtain their input about the structure of the program. The reaction has been very positive, and individuals we've spoken to have provided valuable information that is helping us create a program that is not too restrictive, while ensuring the safety and well being of the residents. The individuals we have spoken to indicated that the program design would allow chronically homeless individuals to stay and abide by the guidelines while working to address the problems in their lives and begin developing clean/sober, self-sufficient lives. VOA plans to keep DSS and all homeless service providers aware of the potential availability of units as residents prepare to move to more independent permanent housing to ensure that appropriate individuals are referred to the program. Unfortunately in Binghamton, there are still chronically homeless individuals who live in areas along the river and in other unsuitable situations, and VOA will reach out to these individuals and work to bring them into our program in addition to accepting those people who are referred to us.

Assessment Tool Attachment Detail

Document Description:

Type and Scale of Housing

The following list summarizes all housing units that will be used for participants in the project. To add information to this list, click on the icon and enter the requested information.

Housing Type	Units	Beds	Bedrooms
Clustered apartments	12	12	12

Type and Scale of Housing Detail

Instructions:

For the 2008 competition, the available housing type selections have been re-defined. Refer to the detailed instructions located on the left menu for additional instructions on completing this page.

If the project is funded, the applicant/sponsor will be responsible for operating the project as indicated here. Entering incorrect information may result in the reduction or withdrawal of the conditional award. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Complete the following fields related to the number of units, beds, and bedrooms for each housing type in the project.

Housing Type: Clustered apartments

Total for Selected Housing Type

Units: 12

Beds: 12

Bedrooms: 12

Project Participants - Households with Dependent Children

Instructions:

The purpose of this form is to capture the total number of homeless persons served by the project at a point in time, as well as the subpopulations/disabilities for each household. If the project is not serving households with dependent children, enter "0" in the "Total Number of Households" field, and select "Save & Next" to move to the next form. .

Rapid Re-housing projects: 100% of the adults served by the project must be accompanied by children and should be reflected in the fields below.

Samaritan Housing, Safe Haven, and SRO housing projects: 100% of the households served by the project must not be accompanied by children. Therefore, enter "0" in the "Total Number of Households" field, and select "Save & Next" to move to the next form.

All projects: in the "Total Persons" column indicate the total number of "disabled adults," "non-disabled adults," "disabled children," "non-disabled children," and "Total Number of Households" for each household in the project. The system will auto-populate the remaining fields in this column.

Next, identify the appropriate subpopulation (Severely Mentally Ill, Chronic Substance Abuser, Veterans, Persons with HIV/AIDS, and Victims of Domestic Violence) for each person in the project. If the participants are dually-diagnosed and fit into more than one subpopulation (i.e. severely mentally ill with chronic substance abuse), make sure to indicate these individuals in all appropriate subpopulations (it is possible to have overlapping information). The system will auto-calculate all totals based on the values entered for each subpopulation.

Notice that information cannot be entered into certain fields. Persons with a severe mental illness and/or HIV/AIDS constitute disabled adults; therefore, no entry is allowed in the "non-disabled adult" fields. Also, no values can be entered for any children under the Veterans columns. For homeless assistance programs, chronic substance abuse, by itself, may constitute as a disability.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Indicate the total number of households that include a homeless adult with dependent children. Also identify the number of persons and subpopulations within each household in the project.

Total Number of Households	0					
	Total Persons	Severely Mentally Ill	Chronic Substance Abuse	Veterans	Persons with HIV/AIDS	Victims of Domestic Violence
Disabled Adults	0					
Non-Disabled Adults	0					
Disabled Children	0					
Non-Disabled Children	0					
Total Persons (select "Save" to auto-calculate)	0	0	0	0	0	0
Total Number of Adults (select "Save" to auto-calculate)	0					
Total Number of Children (select "Save" to auto-calculate)	0					

Project Participants - Households without Dependent Children

Instructions:

The purpose of this form is to capture the total number of homeless persons served by the project at a point in time, as well as the subpopulations for each household. If the project is serving households with dependent children, enter "0" in the "Total Number of Households" field, and select "Save & Next" to move to the next form.

Samaritan Housing, Safe Haven, and SRO housing projects: 100% of the adults served by the project must be unaccompanied by children and should be reflected in the fields below.

Rapid Re-housing projects: 100% of the adults served by the project must be accompanied by children. Therefore, enter "0" in the "Total Number of Households" field, and select "Save & Next" to move to the next form.

All projects: in the "Total Persons" column indicate the total number of "disabled adults," "non-disabled adults," "non-disabled unaccompanied youth," "non-disabled children," and "Total Number of Households" for each household in the project. The system will auto-populate the remaining fields in this column.

Next, identify the appropriate subpopulation (Chronically Homeless, Severely Mentally Ill, Chronic Substance Abuser, Veterans, Persons with HIV/AIDS, and Victims of Domestic Violence) for each person in the project. If the individuals are dually-diagnosed and fit into more than one subpopulation (i.e. severely mentally ill with chronic substance abuse), make sure to indicate these individuals in all appropriate subpopulations (it is possible to have overlapping information). The system will auto-calculate all totals based on the values entered for each subpopulation.

Notice that information can only be entered into certain fields. Chronically Homeless persons must be disabled adults in households without children, so no entry is allowed in the "non-disabled adult" fields. Also, Veterans must be adults; therefore, no entry is allowed for unaccompanied youth. All severely mentally ill persons and persons living with HIV/AIDS are automatically considered disabled; therefore, there can be no entry for non-disabled persons. For homeless assistance programs, chronic substance abuse, by itself, may constitute as a disability.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Indicate the total number of households that include a homeless adult without dependent children. Also identify the number of persons and subpopulations within each household in the project.

Instructions:

Chronically Homeless must be disabled adults in households without children (so no entry allowed in non-disabled adult or children/youth)

Severely Mentally Ill are all considered disabled (so no entry allowed in non-disabled)

Chronic Substance Abuse may not constitute a disability on its own

Veterans must be adults (so no entry allowed in children/youth)

Persons living with HIV/AIDS are all considered disabled (so no entry allowed in non-disabled)

Total Number of Households	12
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Volunteers of America of Western New York						EX2_007345	
	Total Persons	Chronically Homeless	Severely Mentally Ill	Chronic Substance Abuse	Veterans	Persons with HIV/AIDS	Victims of Domestic Violence
Disabled Adults	12	12	11	12	2	1	
Non-Disabled Adults	0						
Disabled Unaccompanied Youth	0						
Non-Disabled Unaccompanied Youth	0						
Total Persons (select "Save" to auto-calculate)	12	12	11	12	2	1	0
Total Number of Adults (select "Save" to auto-calculate)	12						
Total Number of Unaccompanied Youth (select "Save" to auto-calculate)	0						

Supportive Services for Participants

Instructions:

The information entered in this form will help determine the project's capacity to provide services or access to services for participants. If the project is requesting supportive services funding, the level of services must be reflected here.

Describe supportive services being offered - all new projects must describe the supportive services that will help participants obtain and remain in permanent housing, access mainstream resources, and/or obtain employment.

Frequency of supportive services - Each new project must also indicate the frequency (daily, weekly, bi-weekly, monthly, quarterly, does not apply) at which these basic supportive services are provided to project participants.

Rapid Re-housing projects- in the "other" boxes, indicate the frequency at which housing placement, literacy training, and legal assistance services will be provided to participants.

Indicate the level of accessibility of community amenities for project participants - basic community amenities include medical facilities, grocery stores, recreation facilities, schools, etc, and should be accessible to participants via walking, public transportation, driving, or transportation provided by the project. For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

In the fields below, provide information about the type of supportive services that will be provided to participants in the project as well as the frequency in which they are provided. In addition, describe how participants will be assisted to increase self-sufficiency.

Describe how participants will be assisted to obtain and remain in permanent housing.

Volunteers of America's Permanent Housing will accept chronically homeless individuals with a disabling condition from emergency shelters, the Department of Social Services, the police, other service providers, and from the street. VOA's case manager will conduct an assessment to determine if the individual is chronically homeless and identify the individual's special needs, problem areas, mental health status, vocational/educational status, medical situation, emotional/behaviorial condition, and their ability to live independently with support services. The case manager will then work with each resident to develop an individualized service plan to address each client's specific needs and provide structure for the client to help them become stabilized in permanent housing. VOA staff will offer support services on site, including: case management, counseling, recovery support, lifeskills training, anger management, and monitoring to help residents remain stabilized in housing.

Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.

Volunteers of America of Western New York (VOA) is requesting funds to create permanent housing units for chronically homeless individuals with disabling condition(s). It is our expectation that very few of these individuals will be able to become employed or live independently for a significant period of time. VOA's initial goals will be to stabilize clients in permanent housing for at least six months and help them begin a course of addiction treatment and/or mental health counseling as appropriate. VOA will also be working to build a level of trust with the residents and help them address self-care and physical health issues. As residents "graduate" to higher levels of stabilization, VOA will offer additional lifeskills training including:

1. Improved personal hygiene
 2. Household maintenance/cleanliness
 3. Nutrition -- purchasing and preparing healthy food on a limited budget
 4. Basic money management
 5. "Soft job skills training" -- focuses on attendance, getting to work on time, proper attire for work, and communicating with co-workers and supervisors.
- The case manager will conduct vocational assessments and will help interested/appropriate residents to enroll in job training and/or educational courses. Because VOA operates SRO and transitional housing programs in Binghamton, the agency has well established linkages with entry-level employers and will use these relationships to help clients who are ready to obtain gainful employment. Employers include temp agencies, food service businesses, retailers, maintenance & housekeeping positions at hotels & hospitals), and manufacturing. Basic job skills learned in these positions enable clients to apply for and/or move into higher paying positions. VOA also refers clients to BOCES, VESID, and Workforce New York for job training, assistance writing resumes, job interview skills, and job searches. VOA's staff will provide ongoing support and monitoring to ensure that clients who become employed can manage daily work issues and handle job-related stress without becoming overwhelmed and sidetracked by problems. For clients who are ready to leave VOA's Permanent Housing and live independently, safe affordable housing is available in the area through the Binghamton Housing Authority. VOA also maintains relationships with reputable landlords who have rental units available for low income households, and VOA will utilize these linkages to help place clients in safe, affordable and appropriate housing. A transition plan will be developed by the case manager to help the resident successfully adjust to independent living. In addition, residents will be invited to contact staff for support once they leave and to return for support group sessions and/or recreational activities. VOA will also help clients develop a support system via their church of origin, their family, and or substance support groups.

Supportive Service	Select frequency
Outreach	
Case Management	Bi-weekly
Life Skills	Daily
Job Training	Weekly
Alcohol and Drug Abuse Services	Daily
Mental Health and Counseling	Weekly
HIV/AIDS Services	Monthly
Health/Home Health Services	Monthly
Education and Instruction	Weekly
Employment Services	Weekly
Child Care	Does not apply
Transportation	Weekly

Other (Specify Below)	
Monitoring	Daily
Other (Specify Below)	
Anger management/coping skills	Bi-monthly
Other (Specify Below)	
Recreation	Bi-monthly

How accessible are basic community amenities (e.g., medical facilities, grocery store, recreation facilities, schools, etc.) to the project? Yes, very accessible

Outreach for Participants

Instructions:

To help determine the eligibility of homeless participants served by the project, as well as the project's eligibility to apply for homeless assistance funding, indicate where the homeless participants are coming from (streets, emergency shelters, safe havens, transitional housing who came directly from the street, or other places). Also, describe how the applicant/sponsor plans to bring these participants into the project.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Complete the following fields related to the outreach plans to bring participants into the project.

Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations.

Note: this includes persons who ordinarily sleep in one of the places listed below but are spending a short time (30 consecutive days or less) in a jail, hospital, or other institution.

40%	Persons who came from the street or other locations not meant for human habitation.
60%	Person who came from Emergency Shelters.
0%	Persons who came from Safe Havens.
0%	Persons in TH who came directly from the street, Emergency Shelters, or Safe Havens.
100%	Total of above percentages

If the total is less than 100%, describe very specifically where the other persons you propose to serve would be coming from, and how these persons would meet the HUD homeless definition.

N/A

Describe the outreach plan to bring these homeless participants into the project.

Volunteers of America of Western New York (VOA) operates emergency housing for homeless adults and will refer chronically homeless individuals with disabling conditions to the new permanent housing units as part of our agency's continuum of care. In addition, Volunteers of America has well-established relationships with other emergency shelters, the Broome County Department of Human Services, police, hospitals, and other service agencies, all of which currently refer appropriate individuals to VOA for assistance. VOA will fully utilize these linkages to ensure that chronically homeless individuals with disabling conditions (especially diagnosable substance abuse disorders and/or serious mental illness) who are in need of permanent housing are referred to our program. VOA's staff may go to shelters, emergency rooms, soup kitchens, and along the river where some homeless individuals sleep to identify chronically homeless individuals in need of permanent housing.

Housing for Participants

Instructions:

The purpose of this form is to determine the ability of the project to meet the housing standards as described in the NOFA. While this form may be visible by all projects, it only applies to specific housing activities. All renewal projects and new SHP-SSO, SHP-HMIS, SHP-SH, S+C-SRA, and S+C-PRA projects do not have to complete this form and may move to the next form.

The maximum allowable length of stay for participants in SHP-TH projects is 24 months. However, Rapid Re-housing participants must not be housed longer than 18 months. HUD does not impose a length of stay restriction on participants in permanent housing projects (S+C, SHP permanent housing, and Section 8 SRO).

All SHP-PH, S+C-TRA, and S+C-SRA projects must describe the reason for selecting the proposed housing structure.

All S+C-PRAR, S+C-SRO, Section 8 SRO projects and SHP projects that are requesting funds for rehabilitation must describe the rehabilitation activities that will be undertaken for housing the participants in the project.

All other project types are not required to complete this form and may move to the next form.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for detailed program requirements.

Complete the following fields related to housing participants in the project.

Will more than 16 persons reside in a structure? No
(If yes, select Save to enter additional information.)

Discharge Planning Policy

The following question must be completed by project applicants that are State or Local government agencies.

Has the state or local government developed or implemented a discharge planning policy or protocol to prevent or reduce the number of persons discharged from publicly-funded institutions (e.g. health care facilities, foster care, correctional facilities, or mental health institutions) into homelessness or HUD McKinney-Vento funded programs?

Not Applicable

Project Leveraging

The following list summarizes the leveraging funds for the project. To add information to this list, click on the icon and enter the requested information.

Total value of written commitment \$1,510,974

Contributor	Source	Date of Commitment	Value of Commitment
Broome Co. Dept. ...	Government	08/29/2008	\$111,024
Volunteers of Ame...	Private	09/04/2008	\$37,626
Volunteers of Ame...	Private	08/13/2008	\$1,200,000
The Addiction Cen...	Private	08/11/2008	\$58,500
Fairview Recovery	Private	08/11/2008	\$49,608
United Health Ser...	Private	08/13/2008	\$54,216

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

A written agreement should include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and date the contribution will be available. It is also important that the written commitment include the project name and be addressed to the project applicant or sponsor.

Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution Cash
Name the Source of the Contribution Broome Co. Dept. of Social Services
Select Type of Source Government
Date of Written Commitment 08/29/2008
Value of Written Commitment \$111,024

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

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Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution Cash
Name the Source of the Contribution Volunteers of America unrestricted revenue
Select Type of Source Private
Date of Written Commitment 09/04/2008
Value of Written Commitment \$37,626

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

A written agreement should include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and date the contribution will be available. It is also important that the written commitment include the project name and be addressed to the project applicant or sponsor.

Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution In Kind

Name the Source of the Contribution Volunteers of America's housing facility
Select Type of Source Private
Date of Written Commitment 08/13/2008
Value of Written Commitment \$1,200,000

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

A written agreement should include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and date the contribution will be available. It is also important that the written commitment include the project name and be addressed to the project applicant or sponsor.

Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution In Kind
Name the Source of the Contribution The Addiction Center of Broome County, Inc.
Select Type of Source Private
Date of Written Commitment 08/11/2008
Value of Written Commitment \$58,500

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

A written agreement should include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and date the contribution will be available. It is also important that the written commitment include the project name and be addressed to the project applicant or sponsor.

Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution In Kind
Name the Source of the Contribution Fairview Recovery
Select Type of Source Private
Date of Written Commitment 08/11/2008
Value of Written Commitment \$49,608

Project Leveraging Detail

Instructions:

Indicate the type, source (government or private), and total amount of contributions for which the project has a written commitment in hand at the time of application. If you do not have a written commitment in-hand, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

A written agreement should include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and date the contribution will be available. It is also important that the written commitment include the project name and be addressed to the project applicant or sponsor.

Eligible leveraging items may include any written commitments that will be used towards the cash match requirements in the project, as well as any written commitments for buildings, equipment, materials, services and volunteer time. The value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g. the value of donated land, buildings, or equipment claimed in 2007 and prior years cannot be claimed as leveraging by that project for 2008 or any other subsequent year).

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewHomelessAndHousingProgramInfo> for additional program requirements.

Select the Type of Contribution In Kind

Name the Source of the Contribution United Health Services Hospital

Select Type of Source Private

Date of Written Commitment 08/13/2008

Value of Written Commitment \$54,216

Homeless Management Information System (HMIS) Participation

Instructions:

The data entered into this form will be used to determine the percentage of clients reported in the CoC's HMIS for this project.

Indicate whether or not the project is participating in the HMIS. If the project is participating in the HMIS, enter additional information about the project's participation in the HMIS, including the total number of clients served by the project, the total number of clients reported in the HMIS, and the percentage of values that are missing ("Null or Missing Values") and/or unknown ("Don't Know or Refused") for all client records reported. If there were no unknown value, enter "0" in any field within the chart, and select "Save & Next" to move to the next form.

If the project is not participating in the HMIS, indicate the reason(s) for non-participation.

For additional instructions and examples on completing this form, reference the online training modules at: <http://esnaps.hudhre.info/training>. Reference the 2008 NOFA for additional program requirements.

All projects must indicate their level of participation in the CoC's HMIS.

Does this project provide client level data to HMIS at least annually? No

Select the "Save" button to enter additional information.

Indicate the reason for non-participation in the HMIS New project not yet operational

For Federal/State prohibition, cite applicable law. For "Other", provide explanation.

SHP Operating Budget

Instructions:

Enter the quantity and total dollar amount of SHP funds requested for each operating cost in the project for each year of the grant term. Enter only the portion of the costs DIRECTLY related to providing day-to-day operations of the project for which SHP funds are being requested. Refer to the SHP Desk Guide for details on eligible operations costs:

<http://www.hudhre.info/index.cfm?do=viewShpDeskguideD>. For detailed instructions and examples on completing this budget, reference the online training modules at:
<http://esnaps.hudhre.info/training>.

By law, SHP funds may be used to pay for up to 75% of the total operations budget for each year of the grant term. This means that the grantee or project sponsor must make cash payment for at least 25% of the project's total operations budget for each year. Although documentation of matching funds is not required in this application, if the project is awarded grant funds, documentation for Year 1 must be presented before grant agreement and entered in the Annual Performance Report (APR) at the end of the operating year. Documentation of cash match for Years 2 and 3, if applicable, must be met by the end of each of those years and entered in the corresponding APR.

Complete the following budget fields detailing how SHP funds will be used for operating costs related to serving project participants.

Eligible Costs	Quantity (limit 200 characters)	SHP Request Year 1	SHP Request Year 2	SHP Request Year 3	Total
1.Maintenance/Repair	.15 of FTE Maintenance Staff and \$400/mo for buildings & grounds upkeep, repair & maintenance	\$8,040	\$8,040	\$8,040	\$24,120
2.Staff	4 FTE Public Safety Officers	\$74,880	\$76,380	\$77,530	\$228,790
3.Utilities	Heat, electricity, water, phones (=\$1,800/mo)	\$21,600	\$22,250	\$22,830	\$66,680
4.Equipment (lease/buy)	Security cameras, computers, % of copier & fax	\$800	\$800	\$800	\$2,400
5.Supplies	Office, medical, & housekeeping supplies (\$100/mo.)	\$1,200	\$1,200	\$1,200	\$3,600
6.Insurance	Pro-rata share of facility's property & liability insurance = \$450/mo.	\$5,400	\$5,600	\$5,600	\$16,600
7.Furnishings	\$375 per unit for 1st year to purchase a portion of the furnishings	\$4,495	\$2,145	\$415	\$7,055
8.Relocation		\$0	\$0	\$0	\$0
9.Other (must specify *)					
		\$0	\$0	\$0	\$0
		\$0	\$0	\$0	\$0
10.Total SHP Request		\$116,415	\$116,415	\$116,415	\$349,245
11.Cash Match		\$39,000	\$39,000	\$39,000	\$117,000
12.Total SHP Operating Budget		\$155,415	\$155,415	\$155,415	\$466,245
13.Other Resources (cash and in-kind)		\$0	\$0	\$0	\$0

*** If not specified, the costs will be removed from the budget.**

The Total values are automatically calculated by the system when you click the "save" button.

SHP Supportive Services Budget

Complete the following budget fields detailing how SHP funds will be used to provide supportive services project participants.

Instructions:

Enter the quantity and total dollar amount of SHP funds requested for each supportive service in the project for each year of the grant term. Enter only the portion of the costs DIRECTLY related to providing services to project participants who are eligible for SHP funding. Refer to the SHP Desk Guide for details on eligible supportive services costs:

<http://www.hudhre.info/index.cfm?do=viewShpDeskguideD> For detailed instructions and examples on completing this budget, reference the online training modules at: <http://esnaps.hudhre.info/training>.

By law, SHP funds may be used to pay for up to 80% of the total supportive services budget for each year of the grant term. This means that the grantee or project sponsor must make cash payment for at least 20% of the project's total supportive services annual budget. Although documentation of matching funds is not required in this application; if the project is awarded grant funds, documentation for Year 1 must be presented before grant agreement and entered in the Annual Performance Report (APR) at the end of the operating year. Documentation of cash match for Years 2 and 3, if applicable, must be met by the end of each of those years and entered in the corresponding APR.

Rapid Re-housing projects - If the applicant is applying for a Rapid Re-housing Demonstration Project and will be providing housing placement, legal assistance and literacy training these items should be listed under "other" costs.

Supportive Services Costs	Quantity (limit 200 characters)	SHP Request Year 1	SHP Request Year 2	SHP Request Year 3	Total	
1. Outreach	.05 of FTE Case Manager	\$2,000	\$2,000	\$2,000	\$6,000	
2. Case Management	.75 of FTE Case Manager	\$30,000	\$30,000	\$30,000	\$90,000	
3. Life Skills (outside of case management)	.20 of FTE Case Manager	\$8,000	\$8,000	\$8,000	\$24,000	
4. Alcohol and Drug Abuse Services					\$0	
5. Mental Health and Counseling Services					\$0	
6. HIV/AIDS Services					\$0	
7. Health Related and Home Health Services					\$0	
8. Education and Instruction		\$0	\$0	\$0	\$0	
9. Employment Services		\$0	\$0	\$0	\$0	
10. Child Care		\$0	\$0	\$0	\$0	
11. Transportation	Vehicle Operating costs & bus tokens for transporting clients to appointments	\$750	\$750	\$750	\$2,250	
13. Other (must specify)						
	Client Assistance Fund	Clothing, personal hygiene items, & household necessities: towels, lamps, etc.)	\$1,200	\$1,200	\$1,200	\$3,600
					\$0	
		\$0	\$0	\$0		
14. Total SHP dollars requested		\$41,950	\$41,950	\$41,950	\$125,850	

Volunteers of America of Western New York			EX2_007345		
15.Cash Match		\$10,550	\$10,550	\$10,550	\$31,650
16.Total SHP Supportive Services Budget		\$52,500	\$52,500	\$52,500	\$157,500
17.Other resources (cash and in-kind)		\$0	\$0	\$0	\$0

Supportive Housing Program (SHP) Summary Budget

Instructions:

To update the individual budget activities (acquisition, new construction, rehabilitation, leasing, supportive services, operations, or HMIS), use the left menu bar to go back to the appropriate budget. Refer to the 2008 NOFA, and the program desk guide located at: <http://www.hudhre.info/index.cfm?do=viewShpDeskguideD> for details on funding limitations, cash match, and eligible budget activities.

The following information summarizes the SHP funding request and the available cash match for the total term of the project. Enter the appropriate amount of administrative costs for the project.

Selected Grant Term 3 Years

SHP Activities	SHP Dollars Request	Cash Match	Totals
1. Acquisition			\$0
2. Rehabilitation			\$0
3. New Construction			\$0
4. Subtotal (Lines 1 - 3)	\$0	\$0	\$0
5. Real Property Leasing From Leasing Budget Chart	\$0		\$0
6. Supportive Services From Supportive Services Budget Chart	\$125,850	\$31,650	\$157,500
7. Operations From Operating Budget Chart	\$349,245	\$117,000	\$466,245
8. HMIS From HMIS Budget Chart	\$0	\$0	\$0
9. SHP Request (Subtotal lines 4-8)	\$475,095		
10. Administrative Costs (Up to 5% of line 9)	\$23,685	Max. Admin. Allowed	\$23,755
	Total SHP Request (Total lines 9 and 10)	Total Cash Match	Total Budget (Total SHP Request + Total Cash Match)
	\$498,780	\$148,650	\$647,430

Public Housing Authority (PHA) Certification Attachment Detail

Document Description:

Program Outcome Logic Model (HUD 96010) Attachment

Document Type	Required?	Document Description	Date Attached
Logic Model for Program Outcome (HUD 96010)	Yes	Logic Model - HUD...	09/03/2008

Program Outcome Logic Model (HUD 96010) Attachment Detail

Document Description: Logic Model - HUD 96010