

FY 2025 NorCal Continuum of Care

CA-516

CoC Funding Project Application Eligibility Assessment

(Complete one for each CoC Project being applied for and due Friday Dec 5, 2025 by 5pm)

Project Name: _____

Applicant: _____

Primary Contact: _____ Phone: _____

Primary Email Address: _____

Alternate Contact: _____ Phone: _____

Alternate Email Address: _____

Project Will Utilize Subrecipients: No _____ Yes _____

Sub-recipient(s): (If applicable) _____

Requested Funding Amount: \$ _____

Project Type being applied for (check one)

- ☐ New Project (Expansion Included)
- ☐ New DV Bonus Project
- ☐ Renewal Project

Project Component (check one)

- ☐ Permanent Supportive Housing
- ☐ Rapid Rehousing
- ☐ Transitional Housing
- ☐ Supportive Services Only – Street Outreach

Funding Purpose (check one)

- ☐ Tenant-based rental assistance
- ☐ Sponsor-based rental assistance
- ☐ Project-based rental assistance
- ☐ Leasing costs
- ☐ Operational costs (case management etc)

Optional Funding Purpose (check one if applicable)

- ☐ New construction
- ☐ Acquisition
- ☐ Rehabilitation

Counties To Serve (check all that apply)

- ☐ Del Norte
- ☐ Lassen
- ☐ Modoc
- ☐ Plumas
- ☐ Sierra
- ☐ Siskiyou
- ☐ Shasta

Populations Project Will Serve

- ☐ Single Individuals
- ☐ Households of more than one
- ☐ Youth Under Age 18
- ☐ Households Fleeing Domestic Violence
- ☐ Women needing privacy in single sex spaces
- ☐ Youth Under Age 18 needing safe spaces
- ☐ Youth 18-24 including pregnant and parenting youth

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APPLICANT ELIGIBILITY THRESHOLD (PASS/FAIL)

Applicants must qualify (pass) under these eligibility requirements in order for their application to be reviewed and ranked in the competition. Applicants deemed to fail these threshold eligibility requirements will not be reviewed and ranked in the competition. Applicants are encouraged to review pages 51-63 of the *NOFO (V. Application Review Information)*.

Applicant Eligibility Threshold
A. Applicant must have a Data Universal Numbering System (DUNS) number and an active registration in the System for Award Management (SAM). Check all appropriate boxes: <input type="checkbox"/> Current DUNS number _____ <input type="checkbox"/> Applying for a DUNS number <input type="checkbox"/> SAM UEI entity identifier _____ <input type="checkbox"/> Registering in SAM (currently)
B. Applicant must be a non-profit organization, state, local government or public agency, public housing agency, Indian Tribe, or Tribally Designated Housing Agency. Check the box that describes your agency: <input type="checkbox"/> Non profit organization <input type="checkbox"/> State local government or public agency <input type="checkbox"/> Public housing agency <input type="checkbox"/> Indian Tribe <input type="checkbox"/> Tribally Designated Housing Agency
C. Project Commitments (Initial all Project is able to comply with) 1. If awarded the proposed grant, how many months after being awarded would work begin for this project, including rental assistance if applicable? _____ Months (New Projects Only) 2. Applicant is a Drug Free Workplace (_____) 3. Applicant does not participate in federal lobbying activities in connection with the CoC program (_____) 4. Applicant does not have outstanding delinquent federal debt or judgments (_____) 5. Applicant is not debarred or suspended from doing business with the federal government (_____) 6. Applicant adheres to Fair Housing and Equal Opportunity Act (_____) 7. Applicant will not engage in racial preferences or other forms of illegal discrimination (_____) 8. Applicant will not operate drug injection or 'safe consumption' sites; knowingly distribute drug paraphernalia on or off property under their control, permit distribution of illicit drugs under the pretext of 'harm reduction' (_____) 9. Attach proof of non-profit or public agency 10. Attach a description of your financial and management capacity and experience to carry out the project 11. Attach your organization's most recent audited financials

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<p>D. Match (25%)</p> <p>1. (Estimated) Match Sources and Amounts</p> <div style="margin-left: 100px;"> <div style="display: flex; justify-content: space-between; width: 60%;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="text-align: right;">\$</div> </div> <div style="display: flex; justify-content: space-between; width: 60%;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="text-align: right;">\$</div> </div> <div style="display: flex; justify-content: space-between; width: 60%;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="text-align: right;">\$</div> </div> <div style="display: flex; justify-content: space-between; width: 60%;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="text-align: right;">\$</div> </div> <div style="display: flex; justify-content: space-between; width: 60%;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="text-align: right;">\$</div> </div> </div>
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PROJECT QUALITY THRESHOLD (PASS/FAIL)

Applicants must qualify (pass) under these eligibility requirements in order for their application to be reviewed and ranked in the competition. The number of criteria which must be met in order to be eligible is noted within each project component type.

Project Quality Threshold

A. New Permanent Supportive Housing or Rapid Rehousing Projects Only

Check all that apply (at least three required to be eligible) and attach a description of the associated policies to prove qualification (label as indicated):

- ☐ Type of housing and number of configuration of units fit the needs of the program participants (e.g. two or more bedrooms for families)
- ☐ Type of supportive services ensure successful retention or help to obtain permanent housing; service types to include case management, substance use treatment, mental health treatment, employment assistance
- ☐ Project will offer trauma-informed case management
- ☐ Project has experience with homeless projects where employment outcomes were improved
- ☐ Specific plan for ensuring participants will be individually assisted to obtain benefits of the mainstream health, social and employment programs, and others, for which they are eligible to apply and meets the needs of the participants
- ☐ The project is designed to assist participants to obtain and remain in permanent housing in a manner that fits their needs

B. New Transitional Housing Projects Only

Check all that apply (at least four required to be eligible):

- ☐ Type of housing and number of configuration of units fit the needs of the program participants (e.g. two or more bedrooms for families)
- ☐ Project will provide or partner with other organizations to provide eligible supportive services in order to obtain or maintain Transitional Housing
- ☐ Has a plan developed to exit at least 50% of the participants to permanent housing within 24 months and at least 50% of those who exit will have attained employment income
- ☐ Project will be supplemented with resources from other public or private sources from public benefit programs
- ☐ Project will provide at least 40 hours weekly of customized client services and project can attach a supportive services agreement attesting to that commitment
- ☐ Project will offer trauma-informed case management
- ☐ Project can demonstrate the average cost per household is reasonable and consistent with federal regulations
- ☐ Specific plan for ensuring participants will be individually assisted to obtain benefits of the mainstream health, social and employment programs, and others, for which they are eligible to apply and meets the needs of the participants

C. New Supportive Services Street Outreach Projects Only

Check all that apply (at least four are required to be eligible):

- ☐ Project will conduct an annual assessment of the service needs of the program participant

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- ☐ Project will provide supportive services for participants with history of unsheltered homelessness as well as those who do not traditionally engage with services
- ☐ Project will be supplemented with resources from other public or private sources from public benefit programs
- ☐ Project will demonstrate it has a history of partnering with first responders and law enforcement to engage people living in places not meant for human habitation and will not interfere or impede with law enforcement to enforce local public camping and drug use laws
- ☐ Project will use a standardized assessment process for all participants

Project Readiness

1. Administrative Experience

Describe your experience (and sub-recipient, if applicable) in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of sub-recipients (if applicable) regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants. (Attach description titled "Administrative Experience"; two-page maximum)

2. Data Management

Describe overall how the agency maintains data about homeless clients including participation in the NorCal HMIS. Describe how your agency understands data collection and data quality and the relevance to funded projects as well as client outcomes

3. Implementation Timeliness

Describe the plan for rapid implementation of the program with proposed activities on a schedule for 60 days, 120 days and 180 days, include when the project will begin housing the first participant. (Attach description titled "Timeliness"; one page maximum)

4. Property Status

If applying for leasing, operational expenses, or project-based rental assistance, have you secured the property for your project?

- ☐ Yes
- ☐ No
- ☐ In the process, please describe (Attach a description titled "Property Status")

Instructions:

Date Completed: _____

Authorizing Signature: _____

Date Received by T.E.A.C.H: _____

Received By: _____

Submit Completed Word Doc or attach a scanned copy by Email No Later than Friday December 5, 2025

Jamie Northrup

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T.E.A.C.H. Inc.

jnorthrup@teachinc.org