Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.

 The CoC Priority Listing includes:
 - Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.
 - Project Listings:

- New;
 - Renewal;
 - UFA Costs;
 - CoC Planning;
 - YHPD Renewal; and
 - YHDP Replacement.
 - Attachment Requirement

- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

 Things to Remember:
 - New and Renewal Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.
 - Project applications on the following Project Listings must be approved, they are not ranked per the FY 2021 CoC Program Competition NOFO:

- UFA Costs Project Listing;
 - CoC planning Project Listing;
 - YHPD Renewal Project Listing; and
 - YHDP Replacement Project Listing.
 - Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
 - For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
 - If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

 Additional training resources are available online on HUD's website.
 https://www.hud.gov/program_offices/comm_planning/coc/competition

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing
Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

Collaborative Applicant Name: Economic Security Corporation of Southwest
Area

2. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2022 into one or more new projects?   Yes

3. Reallocation - Grant(s) Eliminated

CoCs reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2021 CoC Program Competition NOFO – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects must identify those projects on this form.

Amount Available for New Project: (Sum of All Eliminated Projects)				
$21,139				
Eliminated Project Name	**Grant Number Eliminated**	**Component Type**	**Annual Renewal Amount**	**Type of Reallocation**
The Salvation Arm...	MO0034L7P022013	PH-RRH	$21,139	Regular

3. Reallocation - Grant(s) Eliminated Details

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

3-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process. Refer to the FY 2021 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name: The Salvation Army of Joplin, MO RRH Renewal

Grant Number of Eliminated Project: MO0034L7P022013

Eliminated Project Component Type: PH-RRH

Eliminated Project Annual Renewal Amount: $21,139

3-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 750 characters)

The Salvation Army decided not to apply for renewal funding. The CoC was notified on October 21, 2021 of their intention to not apply. This is considered a voluntary reallocation in our CoC. They were informed by the CoC on October 28, 2021 that they were not included in the priority listing for funding.

4. Reallocation - Grant(s) Reduced

CoCs reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2021 CoC Program Competition NOFO – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects must identify those projects on this form.

Amount Available for New Project (Sum of All Reduced Projects)					
Reduced Project Name	**Reduced Grant Number**	**Annual Renewal Amount**	**Amount Retained**	**Amount available for new project**	**Reallocation Type**
This list contains no items					

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the New Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

   To upload all new project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps. https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PH/Realloc	PSH/RRH	Expansion
MO Joplin HMIS Pr...	2021-10-15 17:47:...	HMIS	Institute for Com...	$30,823	1 Year	9	PH Bonus		
2021 SCN - Shelte...	2021-11-12 13:23:...	PH	Missouri Departme...	$26,139	1 Year	E8	PH Bonus	PSH	Yes

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

 To upload all renewal project applications submitted to this Project Listing, click the ""Update List"" button. This process may take a few minutes based upon the number of renewal projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.
 https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.	X
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	X
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.	

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
Rapid Re-Housing ...	2021-09-21 09:27:...	1 Year	Economic Security...	$36,768	5	RRH	PH		
Shelter Plus Care...	2021-10-11 12:45:...	1 Year	Economic Security...	$78,684	1	PSH	PH		
2021 - SCN Shelte...	2021-10-13 15:52:...	1 Year	Missouri Departme...	$237,233	E7	PSH	PH		Expansion

ESC Rapid Re-Hous...	2021-10-18 17:10:...	1 Year	Economic Security...	$71,492	6	RRH	PH		
Permanent Housing...	2021-10-13 11:12:...	1 Year	Economic Security...	$89,101	2	PSH	PH		
Catholic Charitie...	2021-10-14 14:25:...	1 Year	Catholic Charitie...	$23,924	3	RRH	PH		
Chronic Homeless ...	2021-11-10 09:59:...	1 Year	Economic Security...	$53,115	4	PSH	PH		

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

  To upload the CoC planning project application submitted to this Project Listing, click the ""Update List"" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

  Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.
  https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
Planning Project ...	2021-10-04 16:32:...	1 Year	Economic Security...	$18,494	Yes

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the YHDP Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all YHDP renewal project applications submitted to this Project Listing, click the ""Update List"" button. This process may take a few minutes based upon the number of YHDP renewal and replacement projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing.	
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing renewal projects.	X

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted?	PSH/RRH	Consolidation Type
This list contains no items								

Continuum of Care (CoC) YHDP Replacement Project Listing

Instructions:

Prior to starting the YHDP Replacement Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

  To upload all YHDP replacement project applications submitted to this Project Listing, click the ""Update List"" button. This process may take a few minutes based upon the number of YHDP replacement projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the YHDP Replacement Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.
 https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted?
This list contains no items						

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after the you approved, ranked (New and Renewal Project Listings only), or rejected project applications. You must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount your CoC's Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
Renewal Amount	$590,317
New Amount	$56,962
CoC Planning Amount	$18,494
YHDP Amount	
Rejected Amount	$0
TOTAL CoC REQUEST	$665,773

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	Certificate of Co...	10/26/2021
FY 2021 Rank Tool (optional)	No	Rank and Review Tool	10/26/2021
Other	No		
Other	No		

Attachment Details

Document Description: Certificate of Consistency

Attachment Details

Document Description: Rank and Review Tool

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

WARNING: The FY2021 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

Page	Last Updated
Before Starting	No Input Required
1A. Identification	10/04/2021
2. Reallocation	11/09/2021
3. Grant(s) Eliminated	11/09/2021
4. Grant(s) Reduced	No Input Required
5A. CoC New Project Listing	11/12/2021
5B. CoC Renewal Project Listing	11/10/2021
5D. CoC Planning Project Listing	11/10/2021
5E. YHDP Renewal	No Input Required

5F. YHDP Replace	No Input Required
Funding Summary	No Input Required
Attachments	10/26/2021
Submission Summary	No Input Required

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: _Joplin / Jasper / Newton County CoC-MO 602_

Project Name: _See attached list_

Location of the Project: _City of Joplin, MO Jasper County, MO
Newton County, MO_

Name of
Certifying Jurisdiction: **MO Dept. of Economic Development**

Certifying Official
of the Jurisdiction Name: **Mary Rajek**

Title: **Community Development Block Grant Program Manager**

Signature: _____ Digitally signed by Mary Rajek
Date: 2021.10.25 13:30:07 -05'00'

Date: **10/25/2021**

OMB Approval No. 2506-0112 (Exp. 7/31/2022)

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: _Joplin/Jasper/Newton county Coc-Mo602_

Project Name: _See attached list_

Location of the Project: _City of Joplin, MO Jasper County, MO
Newton county MO_

Name of
Certifying Jurisdiction: _City of Joplin_

Certifying Official
of the Jurisdiction Name: _Troy Bolander_

Title: _Dir. of Plan, Dev, + N.S._

Signature: _____

Date: _10/19/2021_

OMB Approval No. 2506-0112 (Exp. 7/31/2022)

The Joplin/Jasper/Newton County CoC-MO-602 continues to provide affordable housing options for approximately 118 people who are experiencing homelessness in Southwest Missouri. The following projects are being submitted for the FY 21 Housing and Urban Development Continuum of Care funding competition.

Department of Mental Health
Project: Permanent Supportive Housing $237,233

Department of Mental Health
Project: Bonus, Expansion funds $25,000

Economic Security Corporation
Project: Rapid Rehousing $79,400
Project: Rapid Rehousing $36,768
Project: Permanent Supportive Housing $89,101
Project: Permanent Supportive Housing $56,297
Project: Permanent Supportive Housing $78,684
Project: CoC Planning Grant $18,494

Institute for Community Alliances
Project: Bonus Funds, HMIS funds $30,823

Catholic Charities
Project: Rapid Rehousing $23,924

Total Funding: $667,816.00

The Homeless Coalition
· Ending Homelessness ·
JASPER & NEWTON COUNTY

Agency	_____
Project Name	_____
Project Funding Type	_____
Total Request for Project	_____
Contact Person & Phone	_____
Contact Email Address	_____
Agency Mailing Address	_____
City and Zip	_____

Instructions: The Review Committee will be reviewing information provided by the CoC Lead, HMIS Lead, and through the renewal form.

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

Section One

1. Did you submit your letter of intent by deadline?

	Yes
	No

Letter of intent

5 points awarded if your agency submitted a letter of intent by the deadline. 2.5 points awarded if your agency submitted the letter of intent but it was submitted no more than 1 week (7 calendar days) late. 0 points awarded if your agency submitted the letter of intent but it was submitted later than one week (8+ calendar days) late. Documentation: Copy of Letter

2. Did your agency attend at least 75% of the last 12 months Homeless Coalition meetings?

	Yes
	No

Attendance
5 points awarded attendance of 75% of meetings. 0 points for less than 75%. Documentation: Attendance roster

3. Did your agency assist in the January 2021 Sheltered or Unsheltered Point In Time Count?

	Provided Sheltered PIT data
	Participated in the Project Homeless Connect
	Participated on one of the Unsheltered PIT teams

2021 Sheltered and Unsheltered count

6 possible points. 2 points awarded for providing sheltered data. 2 points awarded for participating in the PHC event. 2 points awarded for participating in unsheltered count. Documentation: Email from Collaborative Applicant

4. Did your agency submit a copy of your most recent Annual Performance Report (APR)?

Program Start Date	
Program End Date	

APR Due Date	
APR Submit Date	

Annual Report

5 points awarded if current APR has been submitted in SAGE, HUD's web-based reporting system by the APR due date. 2.5 points awarded if the APR is submitted late. 0 points awarded if APR is not submitted. Documentation: Screen shot of SAGE

5. Has your agency been in compliance with The Homeless Coalition's selected Homeless Management

	Yes
	No

A. **HMIS TAA Visit**

5 points if the agency is in compliance. (-3) points if the agency was out of compliance at any point in the last 12 months. (-5) points if the agency was out of compliance in excess of 30 days during the last 12 months. Documentation: Letter from ICA.

B. **HMIS Requested Reports for Federal Reporting (PIT/HIC, System Performance Measures, LSA)**

During the last twelve months, did the project turn in all requested reports for ferderal reporting purposes to ICA on time and with acceptable data quality (accurate client/bed count for PIT/HIC and less than 5% errors on the data quality report card)? Points: None YES/NO Documentation: ICA will notify the Prioritization Committee.

6. Does your agency follow Low Barrier and Housing First principles for the proposed project?

	Yes
	No

Low Barrier and Housing First

5 points if the agency is using the Housing First approach. Documentation: Page from grant application.

7. Does your agency currently have any unresolved findings from a HUD monitoring review?

	Yes
	No

HUD Findings

10 points if the agency is in compliance with HUD. 0 points if the agency is out of compliance with HUD or does not provide a letter. Documentation: Letter from Executive Director.

8. Please complete the chart below concerning any unspent CoC funds that this project had for the last closed out grant.

Project Year	Amount Returned	Percent Returned	Grant Award	Reason for Return

Recaptured funds

5 points awarded if the agency had <3.9% of the total awarded funds from the most recent closed grant recaptured. 3 points awarded if the agency had between 4.0% and 5.9% of total awarded funds from the most recent closed grant recaptured. 1 point awarded if the agency had between 6.0% and 7.9% of total awarded funds from the most recent closed grant recaptured. 0 points awarded if the agency had between >8.0% of total awarded funds from the most recent closed grant recaptured. Documentation: Copy of eLOCCS.

9. Is your agency participating with Housing Connect, The Homeless Coalition's Coordinated Entry

	Yes
	No

Housing Connect
Per Housing Connect policy being developed all funded agencies will use Housing Connect to fill their openings in their homeless housing programs. If yes, 3 points, if no, 0 points.
Documentation: Joplin Side Door Report

10. Does your organization's Board of Directors include at least one person who is experiencing homelessness or have a person who was formerly homeless, or have a waiver for this regulatory requirement?

	Yes
	No

Board of Directors
Agency must provide a copy of either their waiver or a letter certifying that they meet this requirement. Award 1 point if documentation is provided.

Section 2

This section is scored by the committee using reports provided by ICA.
This section is scored using the reports provided by ICA for data quality and performance.

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

11. Performance Data

Earned Income
If the agency had 10% or greater of adults that increased earned income, add 5 points. If at least 8% but less than 10% increased earned income, only add 2.5 points. Documentation: Report from HMIS

Other Income
If the agency had 20% or greater of adults that increased non-employment cash income, add 5

points.If between 15% and 19% of the participants increasing non-cash benefits, only add 2.5 points. Documentation: Report from HMIS

Housing Stability

If at least 95% of participants during the period remained in the PSH program, or exited to a PH Destination then add 5 points. 94% to 85% 3 points. 75% -84% 1 points. Documentation: Report from HMIS

Returns to Homelessness

If less than 10% of persons exiting the project return to homelessness, add 5 points. Documentation: Report from HMIS

Exits to Permanent housing

If at least 80%-100% of persons exit to permanent housing destinations the project will get 5 points. 79% - 60% 3 points, and 59%-40% 1 point. Documentation: Report from HMIS

12. | Data Quality |

Data Quality

If the project scores an A on the Data Quality Report Card they will get 5 points. If they score a B they will recieve 2.5 points. Documentation: Report from HMIS

The undersigned applicant(s) hereby certify that all statements contained in this application are true and correct to the best of applicant(s) knowledge and belief, and that the Review Committee will rely on this certification in reviewing the application.

This document was completed by:

Name:	
Title:	
Agency:	
Project Name:	
Project Type:	

Grant Renewal Checklist Notes (to be completed by CoC Lead Agency)

Scoring Summary for FY 2021 HUD CoC Competition

Section 1 Points
Section 2 Points

Total Agency Prioritization Score

Additional Notes From Review Committee Chair

Review Committee Chair Signature: _____

Name: _____   Email: _____

Approved and Accepted by the Joplin, Japser/Newton Counties CoC on 9-1-21

Jasper and Newton County

Continuum Of Care (CoC)

2021 Rank and Review and Scoring Form - New Bonus, DV Bonus and Reallocation Projects

Agency
Project Name
Project Funding Type
Total Request for Project
Contact Person & Phone
Contact Email Address
Agency Mailing Address
City and Zip

Section One

Instructions for evaluation: This section is designed to evaluate compliance with federal and CoC policies. If any of these standards are not met, the Review Committee reserves the right to request additional information, amend your application back for revision, or choose not to consider the application in the ranking process. Please answer the following questions. Points this section: (0)

Instructions for scoring: This section is designed to evaluate technical sections of the grant and to highlight federal and CoC policies. If any of these standards are not met, the Review Committee reserves the right to request additional information, amend back for revision, or choose not to consider the application in the ranking process.

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

1. **Low Barrier and Housing First for all housing programs**
   Does your agency agree to incorporate the Low Barrier and Housing First principles outlined within the proposed project application?

	Yes
	No

   Low Barrier and Housing First for all housing programs
   If the agency was able to check off all boxes for "Low Barrier" and "Housing First Approach" box in the project application, and the agency did not provide any information in the project application narratives that is considered to not be Housing First, the standard is met.

2. **HMIS Participation Acknowledgement**
   Does your agency currently participate, or agree to participate in the HMIS system of the Jasper and Newton County Continuum of Care? If you are a provider of services for people fleeing from **Domestic Violence**, please mark "DV" under this standard to agree to participate in the use of a comparable database.

	Yes
	No

   Homeless Management Information System approved by the BoS

   Participation in the Jasper and Newton County CoC's chosen HMIS, or comparable database if a DV provider, is a requirement.

3. **A) Non-Discrimination Requirements**
   With respect to program beneficiaries, Executive Order 13559 states that organizations, in providing services supported in whole or in part with federal financial assistance, and in their outreach activities related to such services, should not be allowed to discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice. (More information can be found in the CoC Program Interim Rule)

Does your agency understand and agree to not discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice?

	Yes
	No

B) Equal Housing
In addition to the Fair Housing Act, HUD has provided additional guidance ensuring equal access to housing. The Equal Access to Housing Final Rule adds additional protections to ensure that all HUD core programs are available to all eligible individuals and families regardless of sexual orientation, gender identity and marital status. (For more information, please see "Equal Access to Housing in HUD Programs Regardless of Sexual Identity Final Rule)

Does your agency understand that it is illegal to discriminate against any populations based on their race, color, national origin, religion, sex, disability, familial status, sexual orientation, gender identity, or marital status?

	Yes
	No

Non-Discrimination Requirement
If the agency acknowledges both requirements, the standard is met.

4. **Affirmatively Furthering Fair Housing**
   Please provide additional information in regards to how your agency will affirmatively further fair housing .
   Please provide a couple of examples of how you outreach to individuals and families. (24 CFR 578.93(c)

Affirmatively Furthering Fair Housing

If in the response, the agency has provided clear strategies that affirmatively further fair housing as detailed in 24 CFR 578.93(c), and ensure that outreach is conducted to homeless individuals and families who are least likely to request housing or services in the absence of special outreach, the standard is met.

5. **Notice of Occupancy Rights under the Violance Against Women Act *Updated**
Agencies will be required to provide the Notice to all persons at the time an applicant is
admitted, denied, and with any notification of eviction or termination of the program. Does
your agency agree to provide this notification, as well as conform to the other requirements of
VAWA?

	Yes
	No

Notice of Occupancy Rights under the Violance Against Women Act *Updated
If the project agrees to follow VAWA regulations, and ensure that the notice is provided, the
standard is met.

6. **Program Capacity - Financial Audit**
Please provide a cover letter outlining the most recent completed and board approved agency fiscal year audit.

Program Capacity - Financial Audit
The agency has provided a cover letter outlining the most recent completed and Board approved
agency fiscal year audit including independent auditor's report.

7. **Program Capacity - Staff Organizational Structure**
Please provide a description of staff that will be designated to this project specifically addressing the following roles- financial
management of the grant, direct services, and oversight.

Program Capacity - Staff Organizational Structure
a) Do the services described seem adequate and appropriate?
b) Is the staffing pattern adequate and appropriate?
If both (A) and (B) are answered sufficiently, the standard is met.

8. **Threshold Requirements**
Applicant must meet HUD's Threshold Requirements. Have an active DUNS Number and current registration status in SAM.
See page 44 of NOFO for more details.

	Yes
	No

9. **Organization's board of directors includes at least one person who is experiencing homelessness or a formerly
homeless individual, or have a waiver for this regulatory requirement.**

	Yes
	No

Board of Directors   Applicant must provide
a copy of a letter from their Executive Director certifying this or provide a copy of their waiver.

Based on the above information, will the project be scored and ranked in the FY 2021 competition?	YES/NO

Additional Review Committee Notes: including which standards were not met and why.

Section 2: Points this section and Continuum of Care specific requirements (26)

1. Did your agency attend at least 75% of the last 12 months Homeless Coalition's meetings?

	Yes
	No

Attendance
5 points awarded attendance of 75% of meetings. 0 points for less than 75%. Documentation: Attendance roster

2. Did your agency assist in the January Point In Time Count?

	Provided Sheltered PIT data
	Particpated in the Project Homeless Connect event(s)
	Particpated on one of the Unsheltered PIT teams

2021 Sheltered and Unsheltered Count
6 possible points. 2 points awarded for providing sheltered data. 2 points awarded for participating in the PHC event. 2 points awarded for participating in unsheltered count. Documentation: Email from Collaborative Applicant

3. Did your agency submit a letter of intent by deadline?

	Yes
	No

Letter of Intent

5 points awarded if your agency submitted a letter of intent by the deadline. 2.5 points awarded if your agency submitted the letter of intent but it was submitted no more than 1 week (7 calendar days) late. 0 points awarded if your agency submitted the letter of intent but it was submitted later than one week (8+ calendar days) late. Documentation: Copy of Letter

4 Does your agency have any unresolved findings with HUD for any program(s)?

	Yes
	No

HUD Findings
10 points if the agency is in compliance with HUD. 0 points if the agency is out of compliance with HUD or does not provide a letter. Documentation: Letter from Executive Director.

5. Special Populations

Will this project provide services to a targeted subpopulation? If so, please list the subpopulation(s) that the program is targeted to. (Examples include: Substance Use, Mental Health, Domestic Violence, Youth, or Families. This is for informational purposes only, and you will not be scored based on your response.)

Target Population
Documentation: Narrative

6. Housing Connect

Describe your participation with Housing Connect.

Housing Connect
Documentation: Narrative

Section 3: Rapid Rehousing Programs

Instructions for Rank and Review: Please provide the following information based on the type of housing that you are applying for. This section is only for programs wishing to provide Rapid Rehousing Services. Points this section (50)

Instructions for Scoring: This section will be reviewing the narratives. Applicants will receive points in only the RRH or PSH section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total Points for this section (50)

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

1. Scope

Describe what counties you plan to provide these services in, and how you will ensure that the housing services are being provided throughout the identified coverage area

Scope

If the agency adequately describes a plan to provide the services in a multiple county service area, then add 5 points. Key points: Services, Service area and how services will be provided.

2. **Reduce the Length of Time of Homelessness**

A) What is your agency's strategy to identify housing options for program participants? How will your agency recruit and retain landlords?

A) Housing Identification

If the agency provides a strategy, but does not reference reducing barriers or recruiting and retention of landlords, add 3 points.

If the agency provides additional information in the plan specifically identifying recruiting and retention of landlords, or reducing barriers but not both, add 7 points.

If the agency provides additional information in the plan specifically referencing recruiting and retention of landlords AND reducing other barriers, award a total of 10 points.

B) What is your agency's plan to quickly administer the rent and move-in assistance? How will your agency track and administer these funds?

B) Rent and Move-In Assistance

If the agency provides a plan to administer rent and move-in assistance, add 5 points. Key point(s):
Rehousing within 30 days or less.

3. **Increase Exits of Households to Permanent Housing - Stabilization**

Describe how your agency will provide services to clients to assist them in stabilizing housing, employment/benefits acquisition, and other supportive services.

Increase Exits of Households to Permanent Housing

If the agency describes how it will provide supportive services to clients to assist in locating housing, and employment/benefits, add 5 points.

If the agency specifically provides information in the narrative regarding emphasizing client choice, add an additional 5 points.

4. Limit Returns to Homelessness

Describe how your agency will follow up with participants after the rental assistance is completed to assist in maintaining stabilization?

5. Need For Project

Using state and local data sources, explain the need for these services in your area.

Instructions: Please provide the following information based on the type of housing that you are applying for. This section is only for programs wishing to provide Permanent Supportive Housing services. Points this section (50)

Instructions: This section will be reviewing the narrative . Applicants will receive points in only the RRH or PSH section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total points for this section (50)

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

1. Describe what counties you plan to provide these services in, and how you will ensure that the housing services are being provided throughout the coverage area. Will This Program Be Dedicated or Dedicated Plus?

Scope

If the agency adequately describes a plan to provide the services in a multiple county service area, then add 5 points. Key points: Services, Service area and how services will be provided.

2. **Reduce the Length of Time of Homelessness**

   A) What is your agency's strategy to identify housing options for program participants? How will your agency recruit and retain landlords?

A) Housing Identification

If the agency provides a strategy, but does not reference reducing barriers or recruiting and retention of landlords, add 3 points.

If the agency provides additional information in the plan specifically identifying recruiting and retention of landlords, or reducing barriers but not both, add 7 points.

If the agency provides additional information in the plan specifically referencing recruiting and retention of landlords AND reducing other barriers, award a total of 10 points.

B) What is your agency's plan to quickly administer the rent and move-in assistance? How will your agency track and administer these funds?

B) Rent and Move-In Assistance
If the agency provides a plan to administer rent and move-in assistance, add 5 points. Key point(s):
Rehousing within 30 days or less.

3. Housing Stability

Describe how your agency will provide services to clients to assist them in stabilizing housing, acquiring benefits, and other supportive services.

4. Increasing Earned Income

Describe how your agency will provide services to clients to assist them in acquiring earned income, if the client has identified this as a goal.

Income - Earned

If the agency describes how the agency will provide or leverage supportive services surrounding employment if the client chooses to increase income, add 10 points.

5. Need For Project

Using state and local data sources, explain the need for these services in your area.

Need

If the agency describes a need for services in the coverage area, add 3 points.

If the agency provides at least two additional local and/or state data resources in addition to the PIT Count justifying a clear need for the services in the area, add an additional 7 points.

Total This Section (PSH)	0

Section 3: Dedicated HMIS

Instructions: Please provide the following information based on the type of housing that you are applying for. This section is only for programs wishing to create a Dedicated HMIS Project. Points this section (50) Instructions: This section will be reviewing the narrative. Applicants will receive points in only the Dedicated HMIS section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total Points this section. Please Note that the scoring explanation and scoring box will directly follow the corresponding question.

1. Scope

Describe the scope of your project. Include details on what services you plan to provide and how you will provide them in a multi-county service area.

2. Need

Using state and local data sources, expaling the need for these services in your area.

3. Adherence to Universal Data Elements

Please describe what data elements are collected and your ability to meet HUD's Universal Data Elements standards.

4. Un-duplicated Client Records

Please describe the capabilities of your Homeless Management Information System including the systems ability to un-duplicate client records.

Unduplicated Client Records	If the applicant

describes how the system can provide un-duplicated client records award 10 points.

5. Reporting Requirements

Please describe how your HMIS has the ability to meet all of the reporting requirements set forth by HUD.

Reporting Award 10 points if the applicant describes the reporting capabilities of the HMIS.

Total this section (HMIS)

Section 3: Joint TH:RRH Component

Instructions: Please provide the following information based on the type of housing that you are applying for. This section is only for programs wishing to create a Joint TH:RRH Project. Points this section (50)

Instructions: This section will be reviewing the narrative. Applicants will receive points in only the TH:RRH section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total Points this section
Please Note that the scoring explanation and scoring box will directly follow the corresponding question

1. **Appropriately utilizing TH and RRH Resources**
   Describe how your program will assist clients in determining which type of housing assistance will meet

Appropriately utilizing TH and RRH Resources

If the agency provides plans in order to assist the client in determining whether TH or RRH is will be most effective. 2.5 points

2. Transitional Housing

With this component, a program participant may choose to receive only the transitional housing unit or the assistance provided through the PH-RRH component, but the recipient or subrecipient must make both types of assistance available. Please describe the process the agency will use to ensure that someone in the Transitional Housing Portion is quickly permanently housed once they feel that they are ready.

Transitional Housing Component
If the agency describes the process they will use to ensure that someone in the TH portion is quickly permanently housed once they feel that they are ready. 2.5 points

3. Reduce the Length of Time of Homelessness

A) What is your agency's strategy to identify permanent housing options for program participants? How will your agency recruit and retain landlords?

Reduce Length of Time

A) Housing Identification

If the agency provides a strategy, but does not reference reducing barriers or recruiting and retention of landlords, add 3 points.

If the agency provides additional information in the plan specifically identifying recruiting and retention of landlords, or reducing barriers but not both, award 7 points.

If the agency provides additional information in the plan specifically referencing recruiting and retention of landlords AND reducing other barriers, award a total of 10 points.

B) What is your agency's plan to quickly administer the rent and move-in assistance? How will your agency track and administer these funds?

B) Rent and Move-In Assistance

If the agency provides an adequate plan to administer rent and move-in assistance, add 5 points.

4. **Increase Exits of Households to Permanent Housing - Stabilization**

Describe how your agency will provide services to clients to assist them in stabilizing housing, employment/benefits acquisition, and other supportive services.

Increase Exits of Households to Permanent Housing

If the agency describes how it will provide supportive services to clients to assist in locating housing, and employment/benefits, add 5 points.

If the agency specifically provides information in the narrative regarding emphasizing client choice, add an additional 5 points.

5. **Limit Returns to Homelessness**

Describe how your agency will follow up with participants after the rental assistance is completed to assist in maintaining stabilization?

Limit Returns to Homelessness

If the agency has a plan for follow up after the rental assistance ends, add 5 points.

If the agency has a plan detailing how it can extend the provision of supportive services in addition to follow up, add an additional 5 points.

6. **Need For Project**

Using state and local data sources, explain the need for these services in your area. Include how this component will meet the gaps in services for the area you plan to assist.

Need

If the agency describes a need for services in the coverage area, add 3 points.

If the agency provides at least two additional local or state data resources in addition to the PIT Count justifying a clear need for the services in the area AND discusses how the project will meet the service gaps in the area, add an additional 7 points.

Total This Section (TH:RRH)	

Section 3: DV Bonus

Instructions for Rank and Review: Please provide the following information based on the type of housing that you are applying for. This section is only for programs wishing to create a DV Bonus Project. Points this section (25)

Instructions for Scoring: This section will be reviewing the narrative. Applicants will receive points in only the TH:RRH section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total Points this section (25)

Please Note that the scoring explanation and scoring box will directly follow the corresponding question

1. **Scope**

    Describe what counties you plan to provide these service in, and how ou will ensure that the housing services are being provided thr the identified coverage area.

Scope

If the agency adequately describes a plan to provide the services in a multiple county service area, then add 5 points. Key points: Services, Service area and how services will be provided.

2. Housing Stability

Decribe how your agency will provide services to cleints to assit them in stabilizing housing, acquiring benefits and other supportive services.

Housing Stability

If the agency describes supportive services surrounding participants in the program including client choice, add 5 points.

3. Need

Using state and local data sources, explain the need fo these services in your area.

4 **History of providing DV services**
   Please describe previous experience in providing serving survivors of domestic violence, dating violence,

History of providing DV

Did the applicant describe previous experience in providing serving survivors of domestic violence, dating violence, sexual assault, or stalking. 5 points

The undersigned applicant(s) hereby certify that all statements contained in this application are true and correct to the best of applicant(s) knowledge and belief, and that the Review Committee will rely on this certification in reviewing the application.

Section 3: DV Bonus: Support Services Only Coordinated Entry

Instructions for Rank and Review: Please provide the following information based on the program type that you are applying for. This section is only for programs wishing to create a DV Bonus Project. Points this section (25)

Instructions for Scoring: This section will be reviewing the narrative. Applicants will receive points in only the Coordinated Entry section, as determined by the type of project that they are submitting. If no conditions for points are met, add 0 points. Total Points this section (25)

1. Scope

Describe the scope of your project. Include details on what services you plan to provide and how you will provide them in a multi-county service area.

2. Need

Using state and local data sources, expaling the need for these services in your area.

3. Centralized Coordinated Entry System

Please describe how your system will cover the two county service area and engages with a wide range of organziations.

4. Advertising Strategy

Please describe how you will outreach and advertise to persons with high barrier needs.

[blank box]

5. Domestic Violence Experience

Please describe your experience in working with or operating Domestic Violence services.

[blank box]

Total This Section (CE)

This document was completed by:

Name:	
Title:	
Agency:	
Project Name:	
Project Type?	

Was the Project Ranked?	YES/NO
Section 2	
Section 3 Points RRH	
Section 3 Points PSH	
Secton 3 Points HMIS	
Section 3 Points TH:RRH	0
Section 3 DV Points TH:RR	0
Section 3 DV Points CE	0

Total Agency Prioritization Score

0

Additional Notes From Review Committee Chair

Review Committee Chair Signature _____

Name: _____ Email: _____

Approved and Accepted by the Joplin, Japser/Newton Counties CoC on 9-1-21