Newark/Essex Continuum of Care
FY2025 CoC Project Application

Because HUD has rescinded the FY2025 NOFO, the CoC has had to put a pause on the local application process. The CoC is **NOT** currently accepting project applications for FY2025 CoC funding. This application is only being provided for agency planning purposes.

ALL PROJECTS

Agency Name: _____

Agency Unique Entity Identifier: _____

Does your agency have an active SAM registration?

☐ Yes   ☐ No

Program Contact Information:

Name: _____

Email: _____

Phone Number: _____

Project Name: _____

Is this a new or renewal project application?

☐ New Project   ☐ Renewal Project

NEW PROJECTS ONLY

Project Type
Is this application for an expansion of an existing renewal project?

☐ Yes   ☐ No

Is this application for a transition grant of an existing renewal project?

☐ Yes   ☐ No

If yes, please list the name of the current CoC project that you are looking to transition:
_____

Will this project be 100% dedicated to serve victims of domestic violence? This is required to receive domestic violence bonus funds.

☐ Yes   ☐ No

Select the new project type that you are submitting this application for:

☐ Permanent Supportive Housing
☐ Rapid Rehousing
☐ Transitional Housing
☐ Supportive Services Only – Standalone
☐ Supportive Services Only – Street Outreach
☐ Supportive Services Only – Coordinated Entry
☐ HMIS

Threshold Review

1. HUD requires all new projects obtain all referrals through the CoC's Coordinated Entry process. If funded, will the project solely take referrals through coordinated entry?

    ☐ Yes   ☐ No

2. HUD requires all CoC funded providers enter data into a Homeless Management Information System or comparable database for domestic violence providers. If funded, will the project adhere to the HMIS/comparable database requirement?

    ☐ Yes   ☐ No

Overall Scope and Service Provision

1. Provide a description that addresses the entire scope of the proposed project including the target population, the number of households to be served, how the project will address and identified need and projected outcomes. If this application is for a new HMIS project, include a description of how the additional funds will be used to expand the CoC's HMIS implementation and ability to use HMIS as a proactive case management tool to promote treatment and recovery.

2. Describe the applicant's experience providing similar housing and services to the proposed or a similar population.

3. Describe the implementation plan for this project including how quickly after receiving the grant agreement the project could hire staff, begin accepting referrals and be fully occupied.

4. Describe how this project will assist households in exiting homelessness and increasing self-sufficiency.

5. Will supportive services be a requirement for program participation.

   ☐ Yes   ☐ No

6. Will substance abuse treatment services be available on-site for this project?

   ☐ Yes   ☐ No

7. Describe how the supportive services and assistance will be offered to ensure that the participant is able to successfully obtain and retain permanent housing.

8. Describe how clients will be assisted to increase employment to maximize their ability to live independently.

9. DV PROJECTS ONLY - Describe how the project will improve the safety of victims of domestic violence.

10. How will this project's budget be supplemented with resources from other public or private sources which may include mainstream health, social and employment programs such as Medicaid, Medicaid, SSI, and SNAP?

New Transitional Housing Programs ONLY

1. Describe how the project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing. Include a description of how the program will meet the 40 hour per week service requirement outlined in the CoC NOFO.

2. Describe your organization's experience providing transitional housing and how the project will ensure that at least 50% of participants will exit to permanent housing within 24 months and at least 50% of participants will exit with employment income.

<u>New Supportive Services Projects ONLY</u>

1. Describe your project's strategy to provide supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.

2. STREET OUTREACH ONLY - Describe your organization's history of partnering with first responders and law enforcement to engage people experiencing unsheltered homelessness to connect them with housing opportunities.

3. STREET OUTREACH ONLY - Will the project cooperate, assist, and not interfere or impede with law enforcement to enforce local laws such as public camping and public drug use laws (where applicable)?

☐ Yes   ☐ No

<u>New Permanent Supportive Housing Projects ONLY</u>

1. Is the project designed to serve elderly (62+) individuals and/or individuals with a physical disability/impairment or developmental disability?

☐ Yes   ☐ No

<u>New Rapid Rehousing Projects ONLY</u>

1. Describe any previously operated homelessness projects where outcomes for employment income were improved compared to the average project in the CoC.

RENEWAL PROJECTS ONLY

<u>Project Type</u>

Which renewal project type are you submitting this application for?

☐ Permanent Supportive Housing
☐ Rapid Rehousing
☐ SSO – Coordinated Entry
☐ HMIS

Is this project 100% dedicated to victims of domestic violence?

☐ Yes   ☐ No

Threshold Review

1. Does the project utilize racial preference, other illegal discrimination or uses a definition of sex other than as binary in humans?

☐ Yes   ☐ No

2. Does the applicant operate drug injection sites or "safe consumption sites," knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of "harm reduction"?

☐ Yes   ☐ No

Project Overview, Service Provision and Changes

1. Provide a brief description of your renewal project including the total number of households that project serves, target population, and whether there are any substantial changes to the project from your FY2024 application.

2. Are supportive services a requirement for program participation?

☐ Yes   ☐ No

3. Are there substance abuse treatment services available on-site for this project?

☐ Yes   ☐ No

4. How do the supportive services and assistance that is offered through this project ensure that the participant is able to successfully obtain and retain permanent housing?

Stakeholder Involvement

1. Describe how the program partners and utilizes services from CoC agencies and community partners including developers, mainstream community providers, grass-roots organizations, victim service providers, people with lived experience and re-entry providers.

2. Describe your agency's process for incorporating input from persons with lived experience including making adjustments to program models and services based on input.

<u>Domestic Violence Projects Only</u>

1. Describe how this project will improve the safety of victims of domestic violence entering the project.