INSTRUCTIONS – PLEASE READ!

** IT IS EXTREMELY IMPORTANT TO FOLLOW ALL INSTRUCTIONS EXACTLY AS WRITTEN. **

Applications that fail to follow completion and submission instructions will score poorly or, for certain failures, not be considered for funding.

Applicants who applied for the ESG sub-grant in previous grant cycles are cautioned to be mindful of the specific instructions for THIS application.

Controlling Statutes

The Emergency Solutions Grants (ESG) Program is designed to end homelessness. Towards that end, it provides financial assistance to an eligible non-profit organization (NPO) or general unit of local government for:

- Street Outreach (SO), to engage with unsheltered homeless populations
- Emergency Shelter (ES), to increase access to, or improve the quality of, emergency shelters
- Rapid Re-Housing (RRH), to quickly move homeless individuals and families into housing
- Homelessness Prevention (HP), which provides financial stabilization to at-risk individuals and families and prevents them from becoming homeless
- Homeless Management Information System (HMIS), to offset the cost of data collection and reporting required by the program;
- Administration (ADMIN)

Each of the above "components" of ESG contains specific activities that may, if specific requirements are correctly documented, be reimbursable from an ESG sub-grant. Those activities and requirements are described in 24 CFR Part 576 and in the Arkansas DHS/DCO Office of Community Services Emergency Solutions Grant Policy and Procedures Manual. Before starting this application, the applicant should review both documents to ensure applicant and project eligibility.

Completion Instructions

This application is an Adobe Acrobat fillable form and can be filled with Adobe Acrobat Reader. Contact Lorie Williams at lorie.williams@dhs.arkansas.gov or at (501) 682-8714 if assistance with this form is required.

Entry field settings should not be changed. The fillable fields in this application are formatted in 12-point Helvetica font with a 1.5 line spacing for readability. Size and readability limitations will be strictly enforced, and applicants who reformat entry fields to display a smaller font or single-spaced text, or who add more than the allowed number of pages to the submission, will not be considered for funding. This is a common practice in many other State and Federal grant programs.

Each section of the application should be completed following the instructions for that section.

Submission Instructions

After completing the application,

1. Print ONE single-sided original.
2. REMOVE the instruction pages. They are NOT part of the application.
3. Sign page four or the application in blue ink.
4. Gather the required attachments, in the order shown on page two of the application, and scan them at 300 dpi into a single PDF document named "Attachments."
5. Assemble this application and the required attachments, insert 10 tabbed dividers as directed in the instructions throughout the application, and insert the entire application package into a hard-sided 1-inch three ring binder. Do not use a binder larger than 1-inch.
6. Mail the entire completed application package in the hard-sided 1-inch three ring binder to:

> The Arkansas Department of Human Services
> Division of County Operations / Office of Community Services
> PO Box 1437, Slot S330
> Little Rock, AR 72203-1437
> Attn: Lorie Williams, Assistant Director

The printed original must be received by the Office of Community Services no later than 4:30 PM May 30, 2018. This is NOT a "postmarked by" date; it is a "must be received by" date, and applications arriving after the published deadline, regardless of the reason, will not be considered for funding. It is solely the applicants' responsibility to mail the application early enough to ensure timely delivery. Early submission and verification of receipt by the Assistant Director of the Division of County Operations would be prudent and is strongly encouraged.

7. In addition to the paper submission, an electronic submission is also required. This Adobe document and the PDF saved in step four above should be sent in a single email to lorie.williams@dhs.arkansas.gov, and a read receipt should be requested.

Scoring Criteria

2018-19 ESG Sub-Grant Applications will be scored according to the following criteria:

Criterion	Maximum Possible Score
Narrative…………………………………………………..……	30
Budget………………………………………………………….	25
Audit…………………………………………………………..	15
Geographic Need……………………………..……………...	10
Capacity………………………………………………………	10
CoC Participation…………………………..…………………	5
Community Partnerships…………………..……………….…	5
TOTAL POSSIBLE POINTS	**100**

***Up to 30 points* will be awarded based on the Narrative**. The applicant should clearly and concisely describe what is being proposed (eligible activity), who the proposed activities would benefit (eligible participants), how the proposed activities will be provided (capacity), and why the proposed activities are to be provided (need).

The application will be scored by reviewers from the ESG unit and reviewers from other Divisions within DHS. The non-ESG reviewers may not be familiar with ESG, and the applicant should compose the narrative so that it is compelling to both ESG and non-ESG reviewers.

The narrative is limited to not more than four pages, but there is no minimum length requirement. The applicant should understand that four pages of repetitive, poorly written narrative will not necessary score higher than a single page of well-written and informative content. The narrative will be scored on the quality, not the quantity, of the content.

***Up to 25 points* will be awarded for the three-part Budget**.

Part I is the ESG Budget. This budget must be entered directly into the application and should indicate how the requested funding, if awarded, should be distributed among the various eligible component activities. *The ESG Budget subtotals are expected to equal the ESG Sub-Grant Component totals on the application cover page!*

Part II is the Project Budget. This budget must also be entered directly into the application and should indicate all other resources that will contribute to the project. *The match must be clearly shown on the Project Budget.*

Part III is an Organizational Budget. The applicant must substitute an Organizational Budget that shows all other programs operated by the applicant in addition to the ESG project. The Organizational Budget will be used to verify that appropriate cost allocation is applied to ESG-eligible expenses. An applicant who is a general unit of local government (a County or municipality) may submit a Departmental Budget here, if appropriate.

All three levels of budget are required *unless the applicant organization exists solely for the purpose of carrying out the ESG project*. If this is the case, the applicant should clearly indicate such in the application and provide only the ESG Budget and the Project Budget. If an applicant fails to provide the necessary budgets, the application will not be considered for funding.

***Up to 15 points* will be awarded for the applicant's most recent Audit**. Counties and municipalities may, if available, submit audits of the Department containing the ESG project. The most recently reported audit is required. If no audit has been conducted, a non-profit organization (NPO) must submit a [Statement of Financial Position][1] (SOP), and a Statement of Cash Flows[2], but these documents may not be substituted for an audit if an audit has been conducted.

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[1] https://www.nonprofitaccountingbasics.org/reporting-operations/statement-financial-position
[2] http://accounting-simplified.com/financial/statements/cash-flow-statement.html

Up to 10 points **will be awarded based on Geographic Need**. Reviewers will score the

application based on the specific counties being served, the available beds in those counties, and PiT count figures.

Up to 10 points **will be awarded based on Capacity**. The ESG program involves significant

paperwork that requires accuracy and attention to detail. Monthly invoices are created using a Microsoft Excel workbook. The applicant's capacity to effectively assemble the necessary file documentation, to successfully complete and submit a payable invoice, and to provide the service(s) described in the application must be supported by a brief description of available resources / personnel.

Five points **will be awarded if the existing applicant can show Active Participation**

in the **appropriate Continuum of Care**. A new applicant will be awarded five points for documented contact that expresses the intent to join and participate.

Up to five points **will be awarded for Community Partnerships**. These partnerships must

be presented on the partners' letterhead, be signed by the partners' responsible party, and clearly state what the partner brings to the project. One point will be awarded for each contributing partner up to a maximum of five.

The score from each reviewer will be summed, and the resulting 5-review score will be divided by five to yield a final application score. Applications with a final application score of 80 or higher may be considered for funding.

Application Assistance

Application submission questions?	Lorie Williams Assistant Director, OCS	(501) 682-8714 lorie.williams@dhs.arkansas.gov
Application formatting issues?	Nancy Mixon ESG Grants Analyst	(501) 682-2617 nancy.mixon@dhs.arkansas.gov
	David Stowers ESG Grants Analyst	(501) 682-3679 david.stowers@dhs.arkansas.gov
	Demetrice Woods ESG Grants Analyst	(501) 682-8716 demetrice.woods@dhs.arkansas.gov

Arkansas Department of Human Services

Division of County Operations
Office of Community Services

Applicant Organization Name:

Continuum of Care:

City, State, ZIP: , Arkansas

County:

2018-2019
Emergency Solutions Grants Program Application

ESG Sub-Grant Component	Requested Funding
Street Outreach (SO)	
Emergency Shelter (ES)	
Rapid Re-Housing (RRH)	
Homelessness Prevention (HP)	
HMIS*	
ADMIN**	
TOTAL REQUESTED	

$1,000.00 Maximum Request for HMIS

**$500.00 Maximum Request for ADMIN*

SECTION 1 :
APPLICATION CHECKLIST

[Insert First Tabbed Divider Here]

APPLICATION CHECKLIST

Each item listed below MUST be provided. Applications that do not include each of the following items are incomplete and will not be considered for funding. The applicant is **<u>strongly</u>** encouraged to obtain necessary signatures and forms early, as some documents require a lead time.

The documents should be assembled, in order, and scanned at 300 dpi resolution into a single PDF file. Paper copies are required with the paper submission and the PDF file is required with the electronic submission.

Attachments

1. SF-424

2. State and Regional Development District Clearinghouse Letters

3. Verification of active SAM registration

4. IRS 501(c)(3) Determination Letter [NPOs only]

5. Continuum of Care "Good Standing" Letter[3]

6. Local Government Approval Letter[4]

7. HUD-2991 Certification of Consistency with the Consolidated Plan

8. Organizational Chart showing Staff involved with operation of the ESG program

9. Audit / SOP & Statement of Cash Flow

10. Organizational Budget

11. Documented Community Partnerships (*must indicate partners' contribution to the project*)

12. Letters of Support

13. Application Narrative

14. HUD Minimum Habitability Standards for Emergency Shelters (*for Shelter Funding Requests Only*)

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[3] The "Good Standing" Letter is not a specific form. It is simply a letter from the applicant's Continuum of Care stating that the applicant has regularly attended meetings and has participated in PiT counts.

[4] The Local Government Approval Letter is not a specific form. It is simply a letter from the Mayor or County Judge approving the project in his or her jurisdiction.

SECTION 2 : APPLICANT INFORMATION

[Insert Second Tabbed Divider Here]

APPLICANT INFORMATION

The applicant must fill out each field in this Section. If the duties in fields 10-13, 14-17, or 18-21 are duplicated, then the applicant must re-enter the information. **Do not leave fields blank.**

1. Legal Name

2. Federal Tax ID Number (TIN)

3. D-U-N-S* Number   *(should be a 9-digit number)*   *http://fedgov.dnb.com/webform

4. Physical Address*

5. Physical City*   6. Physical ZIP*

   * *The physical location is necessary for the Environmental Review and is __required__ for funding consideration. Domestic Violence Shelters should enter "CONFIDENTAL" directly after the address to ensure the address is kept confidential.*

7. Mailing Address

8. Mailing City   9. Mailing ZIP

10. Name of the Responsible Party (RP)

11. RP Title

12. RP Phone

13. RP Email

14. Name of the person who will complete invoices (INV)

15. INV Title

16. INV Phone

17. INV Email

18. Name of the primary HMIS Person (HMIS)

19. HMIS Title

20. HMIS Phone

21. HMIS Email

22. **Responsible Party**

Printed Name: _____

Title: _____

"I hereby acknowledge that the submission of this Emergency Solutions Grants Application has been approved by me and, if necessary, the Board of Directors."

Signature:

[*must be an original signature in blue ink*]

SECTION 3 :
PROJECT INFORMATION

[Insert Third Tabbed Divider Here]

PROJECT INFORMATION

The applicant must complete each item in this Section, except for item #1. A Project Name should only be entered if it differs from the applicant's name. Examples might be a named shelter or a project "doing business as" something other than the parent organization.

1. Project Name

2. Continuum of Care

3. Please enter the counties that this project proposes to serve in the fields below. Please enter only one county per field.

   Applicants proposing to serve ALL counties should understand that this information is used to route calls for service. If an applicant proposes to serve ALL counties, then the applicant must actually be willing to pick up clients from ALL counties when assistance is requested.

4. Please indicate all target populations.

Chronically Homeless

Men

Women

Families

Unaccompanied Youth

Veterans

Domestic / Sexual Violence Victims

Severe Mental Illness (SMI)

Drug / Alcohol Abuse

AIDS / Related Disease

This project will serve ALL eligible populations

SECTION 4 : BUDGETS
Part I - ESG Budget

[Insert Fourth Tabbed Divider Here]

BUDGETS

Part I: The ESG Budget

The applicant must indicate how ESG funds, if awarded, should be distributed.

STREET OUTREACH   Engagement

                            Case Management

                            Emerg. Health/Mental Health Services

                            Transportation

                            Services for Special Populations

EMERGENCY SHELTER   **Shelter Operation**

                            Maintenance

                            Rent

                            Security

                            Fuel

                            Insurance

                            Utilities

                            Food

                            Furnishings

                            Equipment

                            Supplies

                            Hotel/Motel Vouchers

                         Essential Services

                            Case Management

                            Child Care

                            Education Services

                            Employment Assistance/Job Training

                            Outpatient Health

                            Legal Services

                            Life Skills

                            Mental Health Services

                            Substance Abuse Treatment Services

                            Transportation

                            Services for Special Populations

(ES, Cont'd)   **Rehab / Renovation / Conversion**

RAPID RE-HOUSING   **Rental Assistance**

Short-Term Rental Assistance

Med-Term Rental Assistance

Financial Assistance

Moving Costs

Rent Application Fees

Security Deposit

Last Month's Rent

Utility Deposit

Utility Payments

Services

Housing Search/Placement

Housing Stability Case Mgmt.

Mediation

Legal Services

Credit Repair

HOMELESS PREVENTION   **Rental Assistance**

Short-Term Rental Assistance

Med-Term Rental Assistance

Financial Assistance

Moving Costs

Rent Application Fees

Security Deposit

Last Month's Rent

Utility Deposit

Utility Payments

(HP, Cont'd)   **Services**

        Housing Search/Placement

        Housing Stability Case Mgmt.

        Mediation

        Legal Services

        Credit Repair

HMIS *

ADMIN **

ESG Budget Summary

Street Outreach Subtotal

Emergency Shelter Subtotal

Rapid Re-Housing Subtotal

Homelessness Prevention Subtotal

HMIS Subtotal

ADMIN Subtotal

TOTAL ESG REQUEST

NOTE: **Verify that the Subtotals and Total ESG Request above should exactly match the requests on the Cover Sheet!**

    *$1,000.00 Maximum Request for HMIS

    **$500.00 Maximum Request for ADMIN

Part II: The Project Budget

On the following pages, the applicant must enter the budget for the entire ESG Project. The Project Budget should show all Federal, State, Local and Private funds expected to contribute to the project.

SECTION 4 : BUDGETS
Part II - Project Budget

Project Budget

Please complete the projected program Sources and Uses for the period of October 01, 2018 - September 30, 2019.

EMERGENCY SHELTER	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS
SHELTER OPERATION									
Maintenance									
Rent									
Security									
Fuel									
Insurance									
Utilities									
Food									
Furnishings									
Equipment									
Supplies									
Lodging Vouchers									
SHELTER SERVICES									
Case Management									
Child Care									
Educational Services									
Job Training									
Outpatient Health									
Legal Services									
Life Skills									
Mental Health									
Subst Abuse Treat.									
Transportation									
Serv. Special Pop.									
SHELTER REHAB									
Rehab/Reno/Conv									
SHELTER SUBTOTALS									

RAPID RE-HOUSING	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS
RENTAL ASSISTANCE									
Short-Term RA									
Med-Term RA									
FINANCIAL ASST									
Moving Costs									
Rent App Fees									
Security Deposit									
Last Month's Rent									
Utility Deposit									
Utility Payments									
SERVICES									
Housing Search / Placement									
Housing Stability Case Mgt									
Mediation									
Legal Services									
Credit Repair									
RRH SUBTOTALS									

Homelessness Prevention	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS
RENTAL ASSISTANCE									
Short-Term RA									
Med-Term RA									
FINANCIAL ASST									
Moving Costs									
Rent App Fees									
Security Deposit									
Last Month's Rent									
Utility Deposit									
Utility Payments									
SERVICES									
Housing Search / Placement									
Housing Stability Case Mgt									
Mediation									
Legal Services									
Credit Repair									
HP SUBTOTALS									

Street Outreach	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS
Essential Services									
Engagement									
Case Management									
Health/Mental Health Services									
Transportation									
Special Populations									

SO SUBTOTALS									

HMIS* SUBTOTALS	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS

ADMIN* SUBTOTALS	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	TOTALS

PROJECT TOTALS	ESG	Non-ESG HUD Funds	Non-HUD Federal Funds	State Gov't Funds	Local Gov't Funds	Private Donations	Other	Client Fees	PROJECT TOTAL

SECTION 5 : MATCH INFORMATION

[Insert Fifth Tabbed Divider Here]

MATCH INFORMATION

Proposed Match

The Emergency Solutions Grants Program requires a 100% match for each grant dollar awarded. The match may be other Federal monies, State funds, local government funds, corporate gifts, proceeds from fund-raising events, private cash donations or in-kind contributions.

In-kind donated services are valued at the prevailing minimum wage for unskilled labor and $10.00 per hour for skilled labor, except where the services are professional in nature. In-kind professional services, such as waived attorney fees or medical/dental services, are valued at $150.00 per hour. Noncash contributions may also include the fair market value of any real property donated to the sub-grant recipient after the date that HUD signs the grant agreement with the State.

Funds pledged as match for ESG may not be pledged as match for any other grant, and they must not have been obtained by citing the ESG grant as a match.

Applicants must indicate the funding source(s) that are being proposed as match below.

Source	Source Details	Cash Value
Other HUD Funds		
Non-HUD Federal Funds		
State Gov't Funds		
Local Gov't Funds		
Corporate Gifts		
United Way		
Private Contributions		
Fundraising Events		
Client Fees		
Earned Income		
In-Kind Donated Services		
In-Kind Professional Services		
Total Pledged Match		

The Office of Community Services may be able to waive a portion or all of the 100 percent match requirement for applicants who are least capable of providing matching contributions. If you are requesting such a waiver, please indicate the amount below.

1. Match Waiver Request*

Please note that match exemption requests are not guaranteed, and projects requesting a match exemption that cannot be granted will be deemed fiscally non-viable and will not be funded.

2. In the space provided below, concisely justify any requested match waiver.

Section 6:
Street Outreach Information

[Insert Sixth Tabbed Divider Here]

STREET OUTREACH INFORMATION

1. Are ESG funds being requested to support a Street Outreach project?   YES   NO

    If YES, please complete questions 2 – 5 below. If NO, please skip to Section 7: Emergency Shelter Information.

2. What specific needs will the proposed Street Outreach project address? What are the goals of the project?

3. Cite specific, local evidence of the needs for the services proposed.

4. In what specific areas of the applicant's community will services be provided?

5. Will these Street Outreach services be integrated with other programs serving homeless persons and with mainstream resources? If so, how?

Section 7:
Emergency Shelter Information

[Add Seventh Tabbed Divider Here]

EMERGENCY SHELTER INFORMATION

1.   Are ESG funds being requested to support an Emergency Shelter?   YES   NO

   If YES, please complete questions 2 through 15 below. If NO, please skip to Section 8: Rapid Re-Housing and Homelessness Prevention Information.

2. Has the applicant's shelter recently passed an ESG Minimum Habitability Standards for Emergency

   Shelters Inspection?   YES   NO

   If YES, the applicant MUST include the inspection as part of the attachments.

   If NO, please understand that Emergency Shelter funds will not be awarded to shelters that do not have a passing ESG Minimum Habitability Standards for Emergency Shelters.

3.   What specific needs will the proposed Emergency Shelter project address?

4.   What are the goals of the proposed Emergency Shelter project?

5.   Cite specific, local evidence of the needs for the shelter.

6. Describe the entry requirements for this shelter and explain any requirements clients must meet to remain in the shelter after entry.

7. This Emergency Shelter facility will offer overnight bed space to (*check all that apply*):

Men   Women   Families

8. If this shelter does not offer bed space to men / women / families, how are those not accepted into the shelter helped?

9. How far away is the nearest shelter that does accept any demographic (men / women / families) not accepted into this shelter, and how do homeless persons turned away get to the nearest shelter that will accept them?

10. Describe your agency's process for helping clients obtain and remain in permanent housing.

11. Explain your agency's strategy for ensuring that clients receive individualized assistance to best meet their needs for housing stability. Please describe the types and frequency of services provided.

12. Please explain this shelter's methods for reducing the length of stay, and describe the strategies used to reduce the length of time shelter residents remain homeless.

13.   What was this shelter's average length of stay during the most recent calendar year?

14.   Discuss any diversion methods your agency utilizes during the initial intake process with clients.

15.   Does this shelter ever charge a fee for overnight stay?   YES   NO

Section 8:
Rapid Re-Housing and Homelessness Prevention Information

[Insert Eighth Tabbed Divider Here]

RAPID REHOUSING / HOMELESSNESS PREVENTION INFORMATION

1. Are ESG Funds being requested to support Rapid Re-Housing (RRH) and/or Homelessness Prevention (HP)? Check all that apply.   *RRH*   *HP*

   If either box is checked, complete questions 2 through 6 below.
   If no RRH or HP funding is requested, then proceed to Section 9: Narrative.

2. What specific needs will the RRH/HP project address? Please list specific goals.

3. Please describe the referral process for how clients are referred to your project. Explain how your project is connected to the Coordinated Entry process of your service area.

4. Please explain the strategy for targeting funds to those most at need within your service area. Explain the methods of outreach your agency will use to engage with these individuals or families.

5. Please explain your agency's strategy for ensuring that clients receive individualized assistance to best meet their needs for housing stability. Describe the types and frequency of services provided.

6. Please explain any limitations your agency has within the program, specifically addressing the length of time client can remain in the project and amount of assistance clients are able to receive.

Section 9:
Narrative

[Insert Ninth Tabbed Divider Here]

NARRATIVE SECTION

This section will account for 30% of the application score. It should be compelling to both ESG and non-ESG reviewers.

In this narrative, the applicant should be sure to describe the organization's capacity to both administer this grant and to provide the services proposed.

➢ *Reviewers will be looking for the number of staff, whether the staff is paid or volunteer, familiarity with spreadsheets, and experience / training providing the project's services.*

The applicant should also be sure to describe the population to be served, the demographics and resources of the service area, and the methodology to be used to meet the program needs of the targeted population.

➢ *Reviewers will be looking for descriptions of the target population, the demographics and resources of the community, and basic information (who, what, where, when, how many) on how that population will be served.*

The narrative might also be used to elaborate on issues not touched upon elsewhere in the application, or for which the applicant wishes to provide more detail.

Past performance is not a scoring criterion, but it may factor into DHS' consideration of the anount of funding to award to a selected applicant. Applicants with Monitoring Report Findings from prior grant years may wish to speak to any corrective actions that have been implemented.

The applicant may use up to four pages to submit the narrative. Pages not used should be left in place with the word "Blank" typed on them.

Please note that text entries will not break across pages. Each of the four pages is a separate field, and you will have to manually switch to the next page as needed.

Section 10:
REQUIRED Attachments

**[Insert Tenth and Final Tabbed Divider Here,
Followed By ALL Required Attachments
In Order Shown On Page 2]**