

Central Virginia Continuum of Care (CVCoC)  
Homeless and Special Needs Housing (HSNH) Application for  
Virginia Housing Solutions Program (VHSP)  
2022 - 2024

---

**Please respond to the following questions completely and attach all requested documentation, as incomplete applications will NOT be considered for funding.**

All applications should be emailed to Sarah Fuentes at [sarahfuentes@miriamshouse.org](mailto:sarahfuentes@miriamshouse.org) by *Friday, April 29th at 5pm*. The application with addendums should be attached to one email with the subject line of, "CVCoC HSNH Application." Projects will be selected by the CVCoC Board on May 4, 2022 and will be notified within 48 hours of application decisions or when the CVCoC is notified by DHCD of funding levels.

**Organization:** [Click here to enter text.](#)

**Person submitting proposal** (*this will be the same person contacted with any questions*): [Click here to enter text.](#)

| Project Name | Project Type (i.e. shelter operations, coordinated entry, homeless prevention) | Amount Requested |
|--------------|--|------------------|
|              |  |                  |
|              |  |                  |
|              |  |                  |
|              |  |                  |
|              |  |                  |

**HSNH Organizational Requirements:**

1. My organization complies with program guidelines and applicable state and federal policies and procedures including compliance with non-discrimination laws.  
 No  Yes (*attach organizational non-discrimination policy if a new applicant*)
2. My organization does not engage in inherently religious activities such as worship, religious instruction or proselytization.  No  Yes
3. My organization has established standard accounting practices including internal controls, fiscal accounting procedures and cost allocating plans and tracks agency and program budgets by revenue sources and expenses.  
 No  Yes (*attach financial policies if a new applicant*)

4. My organization does not have outstanding audit findings, IRS findings, DHCD monitoring findings or other compliance issues.  No  Yes
5. My organization has not received DHCD funding since July 1, 2020 and is willing to undergo an organizational assessment by DHCD.  No  Yes  n/a
6. My organization is registered in CAMS and the financial management documentation is current.  No  Yes
7. My organization complies with the CVCoC Written Standards.  No  Yes *(If a new applicant provide program policies for the project type seeking funding)*
8. Provide evidence of your organization's capacity to include governance, leadership, experience and financial management. [Click here to enter text.](#)
9. Describe your organization's participation in the Central VA CoC including leadership roles such as chairing committees or working groups. [Click here to enter text.](#)
10. Describe in detail how the organization implements a Housing First approach. Include specific examples of how the organization implements a Housing First approach such as organizational or programmatic policies, procedures, guidelines, etc. [Click here to enter text.](#)

**Grant Financial Request:**

11. Provide your proposed one year (2022-2023) project activity/ies budget/s to include line items for each eligible cost. For a complete list of eligible costs review DHCD's Virginia Homeless and Special Needs Housing Funding Guidelines 2022-2024. [Click here to enter text.](#)
12. Provide proposed match amount (at least 25% of requested amount) and describe how your organization will secure the required match. [Click here to enter text.](#)
13. Provide the expected number of households and individuals that will be served each year from July 1, 2022 to June 30, 2024. [Click here to enter text.](#)

**New Projects**

*If a new project, please complete the following section:*

14. Does your agency have the capacity to administer the requested funding? Will project activities be ready to begin on July 1? If any portion of the funding request is to pay for a new staff position, how will the agency ensure position is filled in a timely manner?
15. How does or will your project leverage mainstream resources? [Click here to enter text.](#)
16. Please describe how your project does or will participate in the local coordinated entry system. [Click here to enter text.](#)
17. Describe how your project does or will fulfill the goals of VHSP to prevent and divert households from becoming homeless, reduce the number of households who enter the homeless response system, shorten the length of time households experience homelessness and reduce the number of persons who return to homelessness. [Click here to enter text.](#)
18. Describe how your project implements a Housing First approach including specific examples of how the project provides low barrier access to housing and services, reduces program involuntary discharges, implements a voluntary service model, and emphasizes housing-focused services aimed at quickly attaining permanent housing. Attach your project's Housing First Policy. [Click here to enter text.](#)
19. Describe in detail how your project is meeting the requirement to reduce barriers to services and the specific barriers that have been reduced. Are there any remaining barriers to services? For example, birth certificate or photo ID. If so, list what is the purpose of the requirement and what efforts does your organization make to assist households that cannot meet the requirement. Additionally, describe in detail how your project meets the Prohibition Against Involuntary Family Separation and Equal Access and Prohibited Inquiries requirements. [Click here to enter text.](#)
20. Provide a description of the program staff capacity to include experience and training. Include a list of the applicable certificates of training for direct program staff. [Click here to enter text.](#)
21. Please indicate your intention to comply with the following requirements (every box must be checked in order to be eligible for DHCD HSNH funding):
  - Full participation in coordinated entry system
  - 100 percent of program participants assessed with community-based common assessment tools
  - Coordination with other homeless services and homeless prevention providers
  - Use of HMIS that meets HUD HMIS data standards (domestic violence programs and HOPWA may use another data system, but must meet all HUD HMIS data standards and reporting requirements)
  - Timely coordinated entry referrals for connection to housing
  - Documentation of program participant homeless status and services received

- Completion of a housing barrier assessment and subsequent individualized housing plan that includes how permanent housing will be maintained when assistance is terminated
- Adherence to a primary focus on quick placement into permanent housing
- Adherence to a secondary focus on housing stability
- A project representative is a member of the Community Case Review and attends 75% of the required meetings
- A homeless or formerly homeless person is a member of the governing body of the organization or similar decision-making body

Additional Attachments:

In addition to the attachments requested above, please also provide:

- Organizational Certification and Assurances
- Job descriptions for any position funded through this application
- Board of Director listing with affiliation
- Memoranda of Understanding, if applicable

All of the information submitted to the CoC Board of the Central Virginia Continuum of Care is a true representation of my project.

---

Signature of Project Representative

Date

---

Signature of Organization Executive/CEO

Date