North Carolina Emergency Solutions Grants-CV

**Crisis Response**

**ESG-CV Project Application**  
For submission information, refer to the NC ESG Application Instructions.

**This form should be uploaded to the Smartsheet Application form** [**here**](https://app.smartsheet.com/b/form/a70501840ecf425ab78fb79c28c57de7)**.**

# **Section 1: Community Need and Proposed Project**

## Organizational/Community Need

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| **1.1 Statement of Need** – Describe the community need that this proposal will be solving. How has this need increased or exacerbated by COVID-19? How was this need identified? How will be these needs be addressed with ESG-CV funding?   |  | | --- | | Enter Response Here- Maximum 2000 Characters | |

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| Proposed Crisis Support Project(s)  |  | | --- | |  | | **1.2 Proposed Project** – Describe the project(s) your agency is proposing to meet the identified need. How was this approach selected? How will your agency ensure that this project serves communities disproportionately affected or at risk from COVID-19? How will this project operate and account for public health guidance from NCDHHS and other public health agencies?   |  | | --- | | Enter Response Here- Maximum 2000 Characters | | |
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| **1.3 Project Timeline—**Is the project ready to start immediately? What is the project timeline (in months)? What is the duration of the project plan?   |  | | --- | | Enter Response Here- Maximum 2000 Characters |   **1.4 Project Outcomes—** Estimate how many people/households will this project serve? How will success be determined?   |  | | --- | | Enter Response Here- Maximum 2000 Characters | |
| **Section 2: Capacity** |

## Staff Capacity

**2.1** Complete the charts below.

|  |  |
| --- | --- |
| **Entire Organization** | **NC ESG Program** |
| Total FTEs: | Number of FTEs paid with NC ESG-CV funding |
| Total PTEs: | Number PTEs Paid with NC ESG-CV funding: |
| Number of Volunteers: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Position** | **Filled with Paid Staff** | **Paid by ESG** | **Proposed to add with ESG-CV funds** |
| Executive Director |  |  |  |
| Intake Worker |  |  |  |
| Case Manager(s) |  |  |  |
| HMIS Organization Administrator |  |  |  |
| Fiscal Officer/Bookkeeper |  |  |  |
| Shelter Director/Manager |  |  |  |
| Housing Specialist/Landlord  Engagement |  |  |  |

**2.2** Please identify any additional ESG-CV Funded positions not listed on chart.

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## Financial Capacity

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| **2.3** Explain your agency’s financial control system and procedures. Include an explanation of how your agency will monitor its activities to ensure that ESG-CV Housing Stability funds are spent in a timely manner and how funds will be applied and tracked against specific activities.   |  | | --- | | Enter Response Here- Maximum 2000 Characters | |
| **2.4** List the staff members, titles, and their duties designated to complete agency reimbursements, statements of revenue and expenses, and manage budgets.   |  | | --- | | Enter Response Here- Maximum 2000 Characters | |

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| **2.5** Does your agency currently receive HUD funding?  **2.6** Has your organization received any HUD findings, resolved or unresolved, within the past 3 years?  **2.6.1** If yes, please describe the findings and **attach** the approved Corrective Action Plan. |
| Enter Response Here- Maximum 2000 Characters |

**2.7** Does your agency have any existing contract(s) with a North Carolina state agency?

**2.7.1** If yes, please describe the existing contracts.

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| Enter Response Here- Maximum 2500 Characters |

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# **Section 3: Connection to Community**

**3.1** **Coordination of Services** – Please explain how your agency will coordinate with local and state partners (e.g., local health department, LME-MCOs, hospitals, FQHCs, Community Action Agencies, etc.) to coordinate services for the individuals you serve. COVID-19 response efforts to include federal, state and local partners in addition to leveraging available funding to prevent duplication of benefits. (i.e. CDBG, FEMA, EOC, Community Action Agencies)?

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| Enter Response Here- Maximum 2000 Characters |

**3.2 Partnerships** – Please describe any partnerships or collaborations with other agencies on this project, if applicable.

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| Enter Response Here- Maximum 2000 Characters |

**3.3 Leveraging Additional Funding** – Please explain how your agency will leverage additional federal, state or other funding (e.g., CDBG, FEMA, etc.). Describe how you will prevent duplication of benefits.

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| Enter Response Here- Maximum 2000 Characters |

# **Section 4: Policies**

Subrecipients are required to adhere to written standards of the CoC/LPA.

4.1 Does the organization operate programs according to all CoC/LPA written

standards? Select yes or no

4.2 If no, which written standards does the organization decline to adhere?

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| Enter Response Here- Maximum 2000 Characters |

4.3 Does the organization participate in the coordinated entry process in the CoC/LPA?

**4.4** Are you currently an active member in the local Continuums of Care in your coverage area?

**4.4.1** If yes, please provide an overview of your participation including coordination of referrals, governance boards, HMIS/comparable database participation, and other activities. If no, please describe how you will outreach and partner with local CoC to coordinate housing services.

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| Enter Response Here- Maximum 2000 Characters |

4.5 Does your organization adhere to federal Violence Against Women Act (VAWA) requirements?

4.6 ESG-CV requires that organizations follow a low barrier, housing first model. Does your organization commit to operating and providing services under a low barrier, housing first model?

4.7 HUD is committed to ensuring Racial Equity among program operations and services. Does your organization commit to operating and providing services in a racially equitable manner and providing racial equity data upon request?

4.8 Does the organization have current Program Policies and Procedures for all ESG funded activities?

4.9 If no, does the organization commit to having these policies and procedures in place by July 1, 2020?

4.10 Has the organization update emergency policies and procedures to reflect any changes due to COVID-19?

# **Section 5. Budget**

How much ESG-CV funding is your agency requesting to support your project(s)?

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What specifically will the funding be used for? How were costs arrived at for this proposal?

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Do you anticipate needing additional ESG-CV funds when the second allocation is available?

If yes, please estimate the amount needed and describe how the funds would be used?

# **Application Required Documents**

**Note:** Each application must be submitted with separate, lettered tabs as outlined on this checklist.

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| --- | --- | --- | --- |
| **TAB** | **Document** | **Nonprofit Applicant** | **Unit of Local Govt  Applicant** |
| **A** | Completed Application | **** | **** |
| **B** | Project budget worksheet | **** | **** |
| **C** | NC DHHS Required Contract Certification Forms &  Documents in the order below | | |
|  | 1. No Overdue Taxes Certification Form | **** | - |
|  | 2. Annual IRS Tax Exemption Verification Form | **** | - |
|  | 3. Annual Conflict of Interest Verification | **** | - |
|  | 4. Conflict of Interest Policy | **** | - |
|  | 5. Current Certificate of Insurance | **** | - |
|  | 6. IRS Tax exemptions Letter | **** | - |
|  | 7. Substitute W-9 | **** | **** |