

Homeless Emergency Aid Program (HEAP) Request for Projects Scoring Tool

Instructions: Please review the Notice of Funding Availability and Request for Projects (RFP) entirely before completing the RFP. Complete RFP's with any accompanying documentation may be submitted via email to stuartm@mendocinocounty.org. The submission deadline is 7 AM, Wednesday December 5th, 2018. Incomplete or late applications will not be accepted.

Amount Available to Mendocino County (based on the 2017 PIT count of 1,238):

Section 50213(a):	Section 50213(b):	Total Available:	Administrative Expenses 5% Cap:	Required Minimum 5% Set-Aside for Youth:
\$4,000,000.00	\$921,967.86	\$4,921,967.86	\$246,098.39	\$246,098.39

Scoring Criteria: Requests will be scored based on their alignment with the Continuum of Care Purpose* to:

1. promote community-wide commitment to the goal of ending homelessness;
2. (provide funding for efforts by nonprofit providers, and State and local governments to) **quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;**
3. promote access to and effect utilization of mainstream programs by homeless individuals and families; and
4. optimize self-sufficiency among individuals and families experiencing homelessness.

Project Name:

Point of Contact:

Phone:

Email:

Total Score:

Total Funding Requested:

Which general category does your project fall under:

Services ☐ Rental Assistance or subsidies ☐ Capital improvements ☐ Youth Services ☐

If applicable, does the proposed project align with California's Housing First Policy?

YES = 10 points No = 0 points

☐

Does this project directly support *at least* 1 of the 4 of the HUD identified components of the COC's purpose? Which? _____

YES = 5 – 10 points NO = 0 points

☐

Is the Project Goal(s) SMART?

Yes = 5 – 25 points NO = 0 points

☐

Do the stated Objectives directly support the Goal(s)?

YES = 5 – 10 points NO = 0 points

☐

Is the Project description consistent with the requirements above?

YES = 10 points No = 0 points

☐

Is there a specific & appropriate target client population?

YES = 10 points No = 0 points

☐

Is there a realistic plan to reach this population?

YES = 10 points No = 0 points

☐

What is the per client cost of this project?	<input type="text"/>
Is there a Plan for assessing the Success of this project? YES = 10 points No = 0 points	<input type="text"/>
Is the Project sustainable post funding? Yes = 5 – 25 points NO = 0 points	<input type="text"/>
Does the Applicant have the experience, knowledge, capacity and support to successfully complete the Project? Yes = 5 – 25 points NO = 0 points	<input type="text"/>
Is any necessary ongoing support immediately, or realistically, available? YES = 10 points No = 0 points	<input type="text"/>
Does this project link with or support existing services or projects? Yes = 5 – 25 points NO = 0 points	<input type="text"/>
Is this Project a priority for our County? Yes = 5 – 25 points NO = 0 points	<input type="text"/>
Is a time-line included? YES = 5 points No = 0 points	<input type="text"/>
Is the time-line realistic? YES = 5 points No = 0 points	<input type="text"/>
Is a detailed and complete Budget attached? Yes = 5 – 15 points NO = 0 points	<input type="text"/>
Are all required support documents complete and attached (project evaluation and reporting plan, including tracking of individual client outcomes, project adjustments, and overall project evaluation)? YES = 10 points No = 0 points	<input type="text"/>
Sub-total Items below may not apply to some applicants, if this is the case, they will not count against the project.	<input type="text"/>
Is the Applicant a current MCHSCoC Member in good standing? YES = 5 - 10 points No = 0 points	<input type="text"/>
Does the Applicant use the MCHSCoC Homeless Management Information System (HMIS) or a comparable Domestic Violence or Legal Services data collection system? YES = 10 points No = 0 points	<input type="text"/>
Does the Applicant have a current ROI allowing complete client information to be included in HMIS? YES = 10 points No = 0 points	<input type="text"/>

Name of Scorer:

Date:

Recommended for: further discussion ☐inclusion as a basis for the grant application request ☐

Comments (add ad'l pages as needed):

Reviewer:

Date:

Comments: