



State Housing Trust Fund Commission for the Homeless
Sample Application for Stable Housing Accountability Program
Contract Period: January 1, 2025 through December 31, 2025

Applicant Information:

Organization's Legal Name:

Contact Person/Title:

Mailing Address:

Email Address:

Direct Phone:

Cellular Phone:

Project Information:

Application/Project Title:

Project Proposed Start Date:

Project Summary:

Total Project Cost:

Total Amount of Stable Housing Accountability Program Funding Requested:

Total Amount of In-Kind Funding:

Bed and Unit Capacity:

1. How many beds does this project have for households WITH children?
2. How many beds does this project have for households WITHOUT children?
3. How many beds does this project have TOTAL?

4. Does the household types and the number of bed available fluctuate based on need?
5. Does the Applicant have the capacity to accept households of six or more?

Projected Counties To Served and Persons To Be Served in Each County

1. What are the counties projected to be covered and/or served by the project?
2. How many individuals do you project to serve from each county during the contract period from January 1, 2025 through December 31, 2025?
3. How many families do you project to serve from each county during the contract period from January 1, 2025 through December 31, 2025?

Counties Currently Served and Persons Currently Served in Each County

1. What are the counties currently being covered and/or served by the project?
2. How many individuals did the project serve from each county during the period from January 1, 2024 through December 31, 2024?
3. How many families did the project serve from each county during the period from January 1, 2024 through December 31, 2024?

Length of Stay

1. What is the current average length of stay for participants in the Applicant's program?
2. What is the current maximum length of stay (in days) for the Applicant's program?

Summary of Supportive Services Currently Provided by Applicant

1. Does the Applicant currently provide Case Management & Ongoing Housing Assistance?
2. Does the Applicant currently provide Emergency Shelter Services?
3. Does the Applicant currently provide Long-Term Shelter & Residential Services?
4. Does the Applicant currently provide Transportation?

5. Does the Applicant currently provide Nutrition Services or Access to Food Resources?
6. Does the Applicant currently provide Child Care?
7. Does the Applicant currently provide Mental Health Services?
8. Does the Applicant currently provide Substance Abuse Treatment Services?
9. Does the Applicant currently provide Capital Rehabilitation Services?
10. Does the Applicant currently incur expenses for Maintenance?
11. Does the Applicant currently incur expenses for Rent?
12. Does the Applicant currently incur expenses for Security?
13. Does the Applicant currently incur expenses for Fuel?
14. Does the Applicant currently incur expenses for Equipment?
15. Does the Applicant currently incur expenses for Insurance?
16. Does the Applicant currently incur expenses for Utilities?
17. Does the Applicant currently incur expenses for Supplies?

Staffing

Does the Applicant possess sufficient staffing and case managers to cater to the projected number of individuals and families in this project application?

What is the total number of staff and/or volunteers utilized for this project?

Among the total staff and/or volunteers listed above, how many specifically serve as case managers?

Project Narrative:

Please provide a detailed project narrative not to exceed twenty-five (25) pages using 12 of the proposed use of funds for a qualified stable housing accountability program as outlined in O.C.G.A. § 8-3-301. The maximum length for the project narrative is 25 pages and it should be double-spaced and submitted in 12-point (minimum) Arial font with at least one-inch margins on all sides and the maximum length for the project

narrative does not include the cover page, table of contents, budget template and any other supporting exhibits. The Project Narrative should also include page numbers and the pagination for the project narrative should be included in the project narrative's footer using right alignment and should also contain the name of the proposed project and the total number of pages provided (ex. *Stable Housing Accountability Program – Page 1 of "X"*).

The project narrative should include:

1. A description of the Applicant's experience, capacity and stability in the provision of housing services for the proposed program participants
2. Information regarding how the Applicant has experience in leveraging resources similar to the funds being proposed in the current stable housing accountability project
3. Information on the staffing and match levels that are sufficient to establish the Applicant's ability to serve the number of projected program participants and adequately address their housing and support service needs
4. A description of how the Applicant has the ability to meet the stable housing accountability program requirements and grant contract deliverables
5. If seeking funding to use for capital improvements, provide a narrative on how these improvements will benefit participants in the stable housing accountability program
6. For transportation services, include a narrative that demonstrates the need and quality of the transportation services being provided
7. Provide details on how match sources will benefit project participants
8. Detailed project design to include a detailed implementation schedule
9. A description of the extent to which the project services the homeless population
10. Describe how your organization will carry out the following activities for the proposed program:
 - a. Ongoing assistance to each participant for obtaining long-term affordable housing

- b. Access to counseling, mental health care, and substance abuse treatment programs for all program participants including the ability to submit to regular drug and alcohol testing and the ability for the program participants to sustain an honest, good-faith effort to achieve or maintain sobriety from drugs and alcohol and abstain from criminal activity
 - c. Assurance that any minor children in the program receive adequate nutrition, health care and education
 - d. Conduct regular inspections of common areas and residential units occupied by program participants
 - e. Establish proof of U.S. citizenship and continuous residency in the state for the previous 12 months
 - f. Participate in free and relevant job training, job search and educational opportunities until stable employment is obtained by program participants
 - g. Submit to compliance requirements of the State Housing Trust Fund for the Homeless Commission as outlined in O.C.G.A. § 8-3-311.
11. Describe how the Applicant will monitor and limit voluntary, immediate, and stable housing to participants for no longer than 18 months or whenever the participant is able to obtain or is offered stable affordable housing, whichever occurs first
 12. The ability to leverage your own or other available funding or in-kind services for the benefit of the proposed program. Please identify the fund source and the status of the source (on hand, awarded, committed, applied for, etc.)
 13. The geographic location(s) within the state of Georgia to be covered by the proposed program with clear references to the need for housing and support services in these locations and including the county or counties to be served in the geographic service area
 14. The quality and type of the various forms of assistance to be offered to participants of the proposed project and how this assistance aligns with the eligible uses for the funding associated with this program
 15. A list of all public and private entities that will be involved in carrying out the proposed program including a description of their specific roles, how they were or will be procured and the current or future relationships that the Applicant will have with these entities.

16. A description of how all public and private entities used to carry out the proposed program will be monitored by the Applicant to ensure that they are effectively executing the activities of the proposed program
17. A description of which entities involved will be responsible for implementing the activities and how they will monitor each activity to ensure all activities are being carried out
18. A description of the residential units and locations that will be used for participants who are enrolled in the proposed program
19. Provide any commitment letters, recommendations, or any other documentation that the Applicant believes will further support the application

Budget Information:

Please provide a detailed budget worksheet in Microsoft Excel format using the budget template included with this application for the total cost of the program to include any in-kind services or funding.