2026 New Projects Application

Submission Deadline: July 22, 2026, at 2:00 p.m. PST

Overview

Continuum of Care

New Projects Application

2026 CoC Program Competition

Submission Deadline: July 22, 2026, at 2:00 p.m. PST

City of Pasadena Department of Housing

199 S. Los Robles Ave., Suite #450, Pasadena, CA 91101

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Notice Regarding Disclosure of Contents of Document

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Note: As HUD has not released the electronic FY 2026 CoC Renewal Projects or Consolidated Applications in the E-SNAPS system, addendums to this application may follow.

Applicant Information

Applicant Information

Organization Name

Organization Type

UEI Number

Employer/Tax ID Number

*On **April 4, 2022**, the unique entity identifier used across the federal government changed from the DUNS Number to the Unique Entity ID (generated by SAM.gov)*

Organization Address

Address Line 1

Address Line 2

City | State | Zip Code

Organization Director/CEO Name (First, Last) | **Email** | **Phone**

Contact Person (First, Last) | **Email** | **Phone**

Please note this information will be included in HUD's electronic grants management system (e-snaps) and will be submitted with the CoC application.

Contact Person Title

New Projects and Transition Grant Application Contact (First, Last) | **Email** | **Phone**

Please include the name of the person working on the project application who should receive a confirmation email once submitted.

Active SAM Status Requirement

☐ I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission and will ensure this SAM registration will be renewed annually to meet this requirement.

Proof of active SAM registration is required to be submitted with this application.

Faith-based Organization

○ Yes ○ No

Is your organization a faith-based organization? More information on faith-based organizations participation in the CoC Program can be found on page 9 of the 2026 CoC NOFO.

Federal Grants

○ Yes ○ No

Has your organization ever received a federal grant, either directly from a federal agency or through a State/local agency?

Federal Lobbying

○ Yes ○ No

Does your organization participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?

Applicant Experience

Applicant Experience

1. Experience Utilizing Federal Funds (max. 3,000 characters)

Please describe:

1. Your organization's experience effectively utilizing federal funds;

2. The number and types of federal contracts administered in the past three years, including the duration and amounts of the contracts; and

3. Your organization's experience with identifying and securing matching funds from a variety of sources, including the types of matching funds you have experience with.

**Applicants with no experience administering federal funds should describe their experience administering other public funds or private grants.*

2. Experience with Leveraging Funds (max. 3,000 characters)

Please describe:

1. Your organization's experience in leveraging federal, state, local, and private sector funding to support projects. If your organization has no experience leveraging other funds, include the phrase "No experience leveraging other federal, state, local, or private sector funds."; and

2. Specify the number and type of different funding sources leveraged in the last three years and which projects the leveraged funding supported.

3. Financial Management Structure (max. 3,000 characters)

Please describe:

1. Your organization's financial management structure, including how your organization has a functioning accounting system that is operated in accordance with generally accepted accounting principles or has designated a fiscal agent that will maintain a functioning accounting system with generally accepted accounting principles;

2. The fiscal control and accounting procedures your organization implements to ensure proper dispersal of and accounting for federal funds in accordance with the requirements of 2 CFR part 200; and

3. Your organization's process to submit monthly invoices and required reports to funders on time.

**Applicants with no experience administering federal funding should describe their experience administering other public funding or private grants.*

4. Unresolved Audit or Monitoring Findings

○ Yes ○ No

Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization?

5. Federal Debt

○ Yes ○ No

Is your agency delinquent on any federal debt?

Project Detail

Project Detail

CoC Bonus & Reallocation

- Estimated Funding Available: $1,850,000
- Street Outreach and/or Transitional Housing Projects

Domestic Violence Bonus

- Estimated Funding Available: $600,000
- Transitional Housing Projects Only

6. Project Type

☑ Street Outreach (SO)

☑ Transitional Housing (TH)

☑ Domestic Violence Bonus - Transitional Housing (DV Bonus - TH)

Please indicate which project type(s) your organization is applying for. If you are submitting applications for multiple project types, please submit all project applications within a single instance of this online form (i.e., do not start a separate form for each project). However, if you are submitting two applications for a single project type (e.g., two street outreach project applications), submit the second application on a separate form.

Awarded projects are required to prioritize people experiencing homelessness in Pasadena.

7. Victim Service Provider

○ Yes ○ No

Is your organization a victim service provider as defined in 24 CFR 578.3? A victim service provider is a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.

8. Replacing Other Funding

○ Yes ○ No

Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? Per federal regulations, no assistance provided under the CoC program may be used to replace State or local funds previously used, or designated for use, to assist people experiencing homelessness.

Street Outreach Project Application (New Projects Only)

Street Outreach Project Application

1. Project Name

2. Proposed Start Date

The start date must be between 7/1/2027 and 12/1/2027.

3. Proposed End Date

The end date should fall in Calendar Year 2027. Grant term must be 12 months.

4. CES Participation

○ Yes ○ No

Will your project participate in a CoC Coordinated Entry Process? If your organization is a victim service provider, as defined in 24 CFR 578.3, will you use an alternate Coordinated Entry process that meets HUD's minimum requirements?

5. HMIS or Comparable Database Participation

○ Yes ○ No

Will the proposed project enter client-level data into the Homeless Management Information System (HMIS)?

To pass threshold requirements, projects are required to participate in HMIS unless the applicant is legal services provider or a victim-service provider whose primary mission is to serve individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault and stalking. These organizations are required to enter data into a comparable database. Select "No" if the project will enter data into a comparable database.

6-16. Project Design

6. Project Description and Need (max. 3,000 characters)

Please provide the following:

1. A detailed description of how the project will operate and how CoC funding will be used, including the target population(s) to be served, plan for addressing temporary and permanent housing and supportive service needs, and how the project will coordinate with other organizations;

2. Describe any evidence-based best practices that will be incorporated into the project; and

3. Convey the project need using supporting data and describe how the project will fill a gap in the CoC.

The information in this description must align with the information entered in other responses of the application.

7. Target Population

☐ Chronically Homeless	☐ Families	☐ Mental Illness
☐ Veterans	☐ Domestic Violence	☐ HIV/AIDS
☐ Youth (under 25)	☐ Substance Use	☐ N/A - Project Serves All Subpopulations

☐

Please identify the project's specific population focus. (select all that apply)

8. Describe the proposed project's strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services. (max. 1,000 characters)

9. Successful Exits to Temporary or Permanent Housing (max. 3,000 characters)

Please describe:

1. The actions that will be taken to assist program participants with rapidly securing temporary or permanent housing that is safe and accessible in a manner that fits their needs. Temporary housing may include emergency shelter, transitional housing, substance use treatment facility or detox center, psychiatric hospital or other psychiatric facility, or long-term care facility or nursing home; and

2. For applicants that have experience operating similar street outreach projects, what percentage of street outreach participants successfully exit to temporary or permanent housing and what is the average length of time between project enrollment and successful exit to temporary or permanent housing destinations? If the applicant does not have experience operating similar street outreach type project, provide data that demonstrates successful outcomes for other homeless services programs types the applicant operates.

Street Outreach Minimum Requirements

Projects must respond "Yes" to at least 3 of the following 4 questions (#10-13) in order to be considered for funding.

10. Will the proposed project be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP?
○ Yes ○ No

11. Does your organization have a history of, or plan for, partnering with first responders and law enforcement to engage people living in places not meant for human habitation to access emergency shelter, treatment programs, reunification with family, transitional housing or independent living?
○ Yes ○ No
Selecting "Yes" also indicates your organization will cooperate with and not interfere with or impede the enforcement of local laws such as public camping and public drug use laws and will assist/be willing to assist first responders in their efforts to engage homeless individuals.

12. Does your organization have experience providing outreach services consistent with the activity description at 24 CFR 578.53(e)(13) and has demonstrated effectiveness at helping people successfully exit from places not meant for human habitation to emergency shelter, treatment programs, transitional housing or permanent housing programs?
○ Yes ○ No

13. Will the project's average cost per household served be reasonable consistent with 2 CFR 200.404?
○ Yes ○ No
A description of reasonable costs can be found at 2 CFR 200.404

14. Connection to mental health services, local crisis system of care, and outpatient mental and substance use treatment (max. 2,000 characters)

Describe how the project will:

1. Provide or link participants to outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports;

2. Provide or link participants to peer recovery specialists or other forms of peer support and recovery navigation;

3. Identify individuals experiencing Serious Mental Illness and connect them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment; and

4. Support linkage to the local crisis system of care including 988 and crisis contact centers, mobile crisis

and outreach services, and crisis stabilization services

15. McKinney-Vento Education Requirements

Applicants requesting funds to provide housing or services to children and youth, with or without families, must establish policies and practices that are consistent with and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, et seq.), and other laws (e.g. Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Projects serving households with children or youth must have a staff person that is designated to ensure children or youth are enrolled in school and connected to the appropriate services within the community.

Failure to comply with federal education assurances may result in Federal sanctions and significantly reduce the likelihood of receiving funding through the CoC Program Competition.

Acknowledgement
☐ Please check the box to acknowledge the project will meet the above requirements if it has any qualifying participants.

16. Project Participants

Enter the number of households for each household configuration that the proposed project expects to serve per year.

Number of Households with at Least One Adult & One Child	Number of Adult Households without Children	Number of Households with Only Children

Total Number of Households
0.00

17-18. Timeliness & Project Readiness

Project Milestones

Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application.

Please include all three project milestones from the dropdown menu provided. Enter "NA" for nonapplicable fields.

***Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award.*

17. Project Milestone	Days from Execution of Grant Agreement

18. Project Readiness (max. 1,000 characters)

Please describe the plan for rapid implementation of the project upon contract execution (if awarded). This should include plans to ensure the project is fully staffed, enrollments begin, and supportive services are near 100% capacity.

19. Funding Request

Estimated Total CoC Bonus & Reallocation Funding Available: $1,850,000

Maximum Budget per Street Outreach Project Application: $1,000,000

Applicants may submit up to two Street Outreach project applications which will be scored independently of each other. The combined total budget for both applications must not exceed $1,850,000.

The information included in this funding request should be for CoC dollars only. If the project will leverage non-CoC resources, indicate this in the budget narrative section.

Indirect Cost Rate

○ Yes ○ No

Will this project propose to allocate funds according to an indirect cost rate?

Funding Request

☐ Supportive Services ☐ HMIS

Please select the budget categories for which funding is being requested.

A description of eligible outreach service costs can be found at 24 CFR 578.53(a), 24 CFR 578.53(e)(13). and 24 CFR 578.53(17).

A description of eligible HMIS costs can be found at 24 CFR 578.57.

20. Match

Sources of Match Detail

The project operator must match all CoC grant funds with no less than 25 percent of funds or in-kind contributions from other sources. Additional match requirement details can be found at 24 CFR 578.73.

Type of Match	Type of Source	Name of Source	Value of Match Commitment

$0.00

Total Value of Cash Commitments	Total Value of In-Kind Commitments

21. Budget Summary

Summary Budget

Please indicate the total assistance requested for each program activity as requested in previous sections.

*This information **MUST MATCH** the total assistance requested for each budget category calculated in the previous sections. Conflicting budget information will result in the loss of points during the evaluation process. Agencies must request the full amount available for Administrative Costs (10% of the project's subtotal costs), which will be split evenly with the City if awarded by HUD.*

Estimated CoC Bonus & Reallocation Funding Available: $1,850,000

Budget Category	Total Assistance Requested for Grant Term

Total Assistance Plus Admin Requested: $0.00

Cash Match	In-Kind Match	Total Match
		$0.00 *Your total match must equal 25% of the total assistance being requested.*

Total Budget (including match)
$0.00

22. Budget Narrative (Optional) (max. 2,000 characters)

Please provide any additional information relevant to the proposed budget, including funding to be leveraged to support the program from other public/private sources and/or justification for the basis of certain proposed costs in the budget.

23. Other Government Assistance
○ Yes ○ No
Will your organization receive any other government assistance (federal, state, local) that will be involved in the proposed project?

24. Interested Parties

*Applicants **must disclose:***

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity; and
2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds $50,000 or 10 percent of the assistance (whichever is lower).

If there are no parties with a financial interest in the project, please indicate N/A.

First and Last Name	Type of Participation	Financial Interest ($)	Financial Interest (%)

Transitional Housing (TH) Project Application

Transitional Housing (TH) Project Application

1. Project Name

2. Proposed Start Date

For new projects, the start date must be between 7/1/2027 and 12/1/2027.

3. Proposed End Date

The end date should fall in Calendar Year 2027. Grant term must be 12 months.

4. CES Participation

○ Yes ○ No

Will the project participate in a CoC Coordinated Entry Process? If your organization is a victim service provider, as defined in 24 CFR 578.3, will you use an alternative Coordinated Entry process that meets HUD's minimum requirements?

5. HMIS or Comparable Database Participation

○ Yes ○ No

Will the proposed project enter client-level data into the Homeless Management Information System (HMIS)?

To pass threshold requirements, projects are required to participate in HMIS unless the applicant is legal services provider or a victim-service provider whose primary mission is to serve individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault and stalking. These organizations are required to enter data into a comparable database. Select "No" if the project will enter data into a comparable database.

6-12. Project Design

6. Project Description (max. 3,000 characters)

Please provide the following:

1. A detailed description of how the project will operate and how CoC funding will be used, including: the target population(s) to be served, plan for addressing housing and supportive service needs, proactive steps that will be taken to reintegrate program participants into the community, and how the project will coordinate with other organizations (e.g., federal, state, nonprofit, faith-based); and

2. Describe any evidence-based best practices that will be incorporated into the project.

The information in this description must align with the information entered in other responses of the application.

7. Target Population

☐ Veterans ☐ Domestic Violence ☐ Mental Illness

☐ Youth (under 25) ☐ Substance Use ☐ N/A - Project Serves All Subpopulations

☐ Families

☐

Please identify the project's specific population focus. (select all that apply)

8. Describe your organization's prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months. (max 1,000 characters)

Applicants without prior experience operating transitional housing or similar projects should describe their plan to ensure participants will exit homelessness within 24 months.

9. Describe how the proposed project will ensure that at least 50% of participants will exit homelessness within 24 months. (max. 1,000 characters)

Please describe:

1. The actions that will be taken to assist program participants with securing permanent housing that is safe and accessible in a manner that fits their needs within 24 months of enrollment in TH;

2. For applicants that have experience operating transitional housing projects, what is the average length of time between project enrollment and permanent housing move-in date? If applicant does not have experience operating transitional housing projects, provide data for other project types that place participants into permanent housing (e.g., emergency shelter, bridge housing, etc.); and

3. What actions are being taken to reduce the amount of time between project enrollment and permanent housing move-in date.

10. Describe how the proposed project will ensure that at least 50% of participants will exit with employment income. (max. 2,000 characters)

Describe how the project will support participants in increasing employment cash income. Include any employment and training partners (e.g., workforce development, employers, childcare, and other supportive services) the project with work with to prepare participants to increase their skills and become gainfully employed. If fewer than 50% of participants are expected to exit with employment income, please explain the reason.

11. Describe how the proposed project will support participants to prevent returns to homelessness after participants have entered permanent housing. (max. 2,000 characters)

12. Describe how the proposed project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP. (max. 500 characters)

13. Inclusion of People with Lived Expertise of Homelessness in Service Delivery and Decision Making (max 1,000 characters).

Please describe the following:

1. Outreach efforts to engage people with lived experience in leadership roles and decision making

processes;

2. Professional development (e.g., internships, continuing education, skill-based training) and employment opportunities that are provided to people with lived experience of homelessness; and

3. Process to gather feedback from people who have received assistance through the CoC program and the steps that are taken to address challenges raised by people with lived experience.

Note: If the program targets a specific subpopulation (e.g., chronically homeless, families, youth, survivors of domestic violence), please highlight how this subpopulation is included in lived expertise representation.

Section

14-25. Service Delivery Plan

14. Describe how the proposed project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing (i.e., case management, behavioral healthcare, employment training, etc.). (max. 1,000 characters)

15. Will the proposed project require program participants to take part in supportive services (e.g. case management, employment training, substance use treatment, etc.) in line with 24 CFR 578.75(h)?

○ Yes ○ No

Consistent with 24 CFR 5.2005(b)(1) assistance may not be denied on the basis or as a direct result of the fact that the participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the participant otherwise qualifies for admission, assistance, participation, or occupancy.

16. Will the proposed project provide program participants individualized services that will result in at least 20 hours per week of engagement in services, activities, or employment?

○ Yes ○ No

Program participants over the age of 62 or with handicaps as defined in 24 CFR 8.3 or with a developmental disability as defined under 24 CFR 578.3 are exempt. Examples of services or activities include case management, counseling, education, job training, community-building activities, etc. Employment may contribute to the 20 hours per week of engagement.

17. Describe how the proposed project will assess the service needs of program participants. (max. 1,000 characters)

18. Will the proposed project create service plans for each program participant?

○ Yes ○ No

Service plans should include services to be provided, when and how often services will be provided, by whom all services will be provided, participant goals, strategies for achieving those goals, and target dates for achievement to focus on improved health and wellness, housing stability, and increased employment income.

19. Connection to mental health services, local crisis system of care, and outpatient mental and substance use treatment (max. 2,000 characters)

Describe how the project will:

1. Provide or link participants to outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports;

2. Provide or link participants to peer recovery specialists or other forms of peer support and recovery navigation;

3. Identify individuals experiencing Serious Mental Illness and connect them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment; and

4. Support linkage to the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services

20. Will the proposed project have on-site substance use treatment available?
○ Yes ○ No

21. In accordance with 24 CFR 578.93(b)(5), will the proposed project operate as "sober housing" by excluding persons who refuse to sign an occupancy agreement or lease that prohibits program participants from possessing, using, or being under the influence of illegal substances and/or alcohol on the premises?
○ Yes ○ No
24 CFR 578.93(b)(5)

22. McKinney-Vento Education Requirements

Applicants requesting funds to provide housing or services to children and youth, with or without families, must establish policies and practices that are consistent with and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, et seq.), and other laws (e.g. Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Projects serving households with children or youth must have a staff person that is designated to ensure children or youth are enrolled in school and connected to the appropriate services within the community.

Failure to comply with federal education assurances may result in Federal sanctions and significantly reduce the likelihood of receiving funding through the CoC Program Competition.

Acknowledgement
☐ Please check the box to acknowledge the proposed project will meet the above requirements if it has any qualifying participants.

23. Available Supportive Services

For all supportive services available to participants, indicate who will provide them and how often they will be provided. Do not limit this selection to just supportive services for which CoC Program funding may be requested in your project application–also include supportive services other organizations or grants will provide. If a supportive service is not included from the list, it will be assumed that this service will not be offered to program participants.

Supportive Services	Provider	Frequency

24. Additional Supportive Services Narrative (Optional) (max. 1,000 characters)

Please provide any additional information related to supportive services that will be provided to program participants.

25. Housing Type and Location

Housing Type	Total Units	Total Beds

Project Address

Address Line 1

Address Line 2

City	State	Zip Code

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For scattered site and single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. If the address for scattered site or single-family home housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

26-27. Project Milestones & Timeliness

26. Project Milestones

Please include all four project milestones from the dropdown menu provided. Enter the number of days from the execution of the grant agreement that each milestone will occur as related to CoC Program funds requested in this project application.

***Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award.*

Project Milestone	Days from Execution of Grant Agreement

27. Project Readiness (max 1,000 characters)

Please describe the plan for rapid implementation of the project upon contract execution (if awarded). This should include plans to ensure the project is fully staffed, enrollments begin, and support participants in rapid placement into TH.

28-32. Budget

28. Funding Request

Estimated Total CoC Bonus & Reallocation Funding Available: $1,850,000

Maximum Budget per Transitional Housing Project Application: $1,000,000

Applicants may submit up to two Transitional Housing project applications which will be scored independently of each other. The combined total budget for both applications must not exceed $1,850,000.

The information included in this funding request should be for CoC dollars only. If the project will leverage non-CoC resources, indicate this in the budget narrative section.

Indirect Cost Rate

○ Yes ○ No

Does this project propose to allocate funds according to an indirect cost rate?

Funding Request

☐ Leased Units (scattered-site and site-based projects)

☐ Supportive Services (scattered-site and site-based projects)

☐ Leased Structures (scattered-site and site-based projects)

☐ VAWA (scattered-site and site-based projects)

☐ Operating Costs (scattered-site and site-based projects)

☐ HMIS (scattered-site and site-based projects)

Select the budget categories for which funding is being requested.

29. Match

Sources of Match Detail

The project operator must match all CoC grant funds with no less than 25 percent of funds or in-kind contributions from other sources. Additional match requirement details can be found at 24 CFR 578.73.

Type of Match	Type of Source	Name of Source	Value of Match Commitment

$0.00

Total Value of Cash Commitments

Total Value of In-Kind Commitments

Program Income as Match

○ Yes ○ No

Will this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?

30-34. Budget Summary

30. Budget Detail

Please indicate the total assistance requested for each program activity as requested in previous sections.

*This information **MUST MATCH** the total assistance requested for each budget category calculated in the previous sections. Conflicting budget information will result in the loss of points during the evaluation process. Agencies must request the full amount available for administrative costs (10% of the project's subtotal costs), which will be split evenly with the City if awarded by HUD.*

Eligible Costs	Total Assistance Requested for Grant Term

Total Assistance Plus Admin Requested: $0.00

Cash Match

In-Kind Match

Total Match

$0.00

Your total match must equal 25% of the total assistance being requested, excluding leasing costs.

Total Budget (including match)

$0.00

31. Budget Narrative (Optional) (max. 2,000 characters)

Please provide any additional information relevant to the proposed budget, including funding to be leveraged to support the program from other public/private sources and/or justification for the basis of certain proposed costs in the budget.

32. Will the average cost per household served be reasonable, consistent with 2 CFR 200.404?
○ Yes ○ No
Link to 2 CFR 200.404

33. Other Government Assistance
○ Yes ○ No
Will your organization receive any other government assistance (federal, state, local) that will be involved in the proposed project?

34. Interested Parties

*Applicants **must disclose:***
1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity; and
2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds $50,000 or 10 percent of the assistance (whichever is lower).

If there are no parties with a financial interest in the project, please indicate N/A.

First and Last Name	Type of Participation	Financial Interest ($)	Financial Interest (%)

DV Bonus- Transitional Housing (TH) Project Application

DV Bonus- Transitional Housing (TH) Project Application

1-4. Domestic Violence Specific Activities

1. Experience Providing Housing to Individuals and Families of Persons Experiencing Trauma or a Lack of Safety Related to Fleeing or Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, and Stalking (max. 2,500 characters)

*Please describe how your organization has **previously** provided housing to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking. Describe how your organization (address each of the following):*

1. Ensured participants were assisted to quickly move into safe affordable housing;

2. Prioritized participants - you must address the process your organization used (e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.);

3. Determined which supportive services for participants were needed;

4. Connected participants to supportive services; and

5. Moved participants from assisted housing to housing they could sustain independently.

2. Ensuring Safety of Individuals and Families Experiencing Trauma or a Lack of Safety Related to Fleeing or Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, and Stalking (max. 2,500 characters)

*Describe how your organization has **previously** ensured the safety and confidentiality of individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking that are experiencing homelessness. Address each of the following:*

1. Taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of individuals and families experiencing trauma or a lack of safety related to fleeing or

attempting to flee domestic violence, dating violence, sexual assault, and stalking;

2. Making determinations and placements into safe housing;

3. Keeping information and locations confidential;

4. Training staff on safety and confidentially policies and practices; and

5. Taking security measures for units (congregate or scattered site), that support the physical safety and location confidentiality of individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

3. Inclusion of Victim-Centered Practices (max. 3,000 characters)

1. Describe how the proposed project will use trauma-informed, victim-centered practices to meet the needs of individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

2. Describe the applicant's experience using victim-centered practices in serving individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking. Address all 7 categories below:

a. Prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;

b. Establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;

c. Providing program participants access to information on trauma (e.g., training staff on providing program participants with information on the effects of trauma);

d. Emphasizing program participants' strengths (e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards goals and aspirations defined by individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking);

e. Providing a variety of opportunities for connection for program participants (e.g., groups, mentorships, peer-to-peer, spiritual needs); and

f. Offering support for parenting for individuals and families experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking (e.g., trauma-informed parenting classes, childcare, connections to legal services).

Transitional Housing (TH) Project Application

5. Project Name

6. Proposed Start Date

For new projects, the start date must be between 7/1/2027 and 12/1/2027.

7. Proposed End Date

The end date should fall in Calendar Year 2027. Grant term must be 12 months.

8. CES Participation

○ Yes ○ No

Will the project participate in a CoC Coordinated Entry Process? If your organization is a victim service provider, as defined in 24 CFR 578.3, will you use an alternative Coordinated Entry process that meets HUD's minimum requirements?

9. HMIS or Comparable Database Participation

○ Yes ○ No

Will the proposed project enter client-level data into the Homeless Management Information System (HMIS)?

To pass threshold requirements, projects are required to participate in HMIS unless the applicant is legal services provider or a victim-service provider whose primary mission is to serve individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault and stalking. These organizations are required to enter data into a comparable database. Select "No" if the project will enter data into a comparable database.

10-16. Project Design

10. Project Description and Need (max 3,000 characters)

Please provide the following:

1. A detailed description of how the project will operate and how CoC funding will be used, including: the target population(s) to be served, plan for addressing housing and supportive service needs, proactive steps that will be taken to reintegrate program participants into the community, and how the project will coordinate with other organizations (e.g., federal, state, nonprofit, faith-based); and

2. Describe any evidence-based best practices that will be incorporated into the project.

The information in this description must align with the information entered in other responses of the application.

11. Target Population

☐ Veterans ☐ Domestic Violence ☐ Mental Illness

☐ Youth (under 25) ☐ Substance Use ☐ N/A - Project Serves All Subpopulations

☐ Families

☐

Please identify the project's specific population focus. (select all that apply)

12. Describe your organization's prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months. (max 1,000 characters)

Applicants without prior experience operating transitional housing or similar projects should describe their plan to ensure participants will exit homelessness within 24 months.

13. Describe how the proposed project will ensure that at least 50% of participants will exit homelessness within 24 months. (max. 1,000 characters)

Please describe:

1. The actions that will be taken to assist program participants with securing permanent housing that is safe and accessible in a manner that fits their needs within 24 months of enrollment in TH;

2. For applicants that have experience operating transitional housing projects, what is the average length of time between project enrollment and permanent housing move-in date? If applicant does not have experience operating transitional housing projects, provide data for other project types that place participants into permanent housing (e.g., emergency shelter, bridge housing, etc.); and

3. What actions are being taken to reduce the amount of time between project enrollment and permanent housing move-in date.

14. Describe how the proposed project will ensure that at least 50% of participants will exit with employment income. (max. 2,000 characters)

Describe how the project will support participants in increasing employment cash income. Include any employment and training partners (e.g., workforce development, employers, childcare, and other supportive services) the project with work with to prepare participants to increase their skills and become gainfully employed. If fewer than 50% of participants are expected to exit with employment income, please explain the reason.

15. Describe how the proposed project will support participants to prevent returns to homelessness after participants have entered permanent housing. (max. 2,000 characters)

16. Describe how the proposed project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP. (max. 500 characters)

17. Inclusion of People with Lived Expertise of Homelessness in Service Delivery and Decision Making (max. 1,000 characters).

Please describe the following:

1. Outreach efforts to engage people with lived experience in leadership roles and decision making

processes;

2. Professional development (e.g., internships, continuing education, skill-based training) and employment opportunities that are provided to people with lived experience of homelessness; and

3. Process to gather feedback from people who have received assistance through the CoC program and the steps that are taken to address challenges raised by people with lived experience.

Note: If the program targets a specific subpopulation (e.g., chronically homeless, families, youth, survivors of domestic violence), please highlight how this subpopulation is included in lived expertise representation.

Section

18-28. Service Delivery Plan

18. Describe how the proposed project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing (i.e., case management, behavioral healthcare, employment training, etc.). (max. 1,000 characters)

19. Will the proposed project require program participants to take part in supportive services (e.g. case management, employment training, substance use treatment, etc.) in line with 24 CFR 578.75(h)?

○ Yes ○ No

Consistent with 24 CFR 5.2005(b)(1) assistance may not be denied on the basis or as a direct result of the fact that the participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the participant otherwise qualifies for admission, assistance, participation, or occupancy.

20. Will the proposed project provide program participants individualized services that will result in at least 20 hours per week of engagement in services, activities, or employment?

○ Yes ○ No

Program participants over the age of 62 or with handicaps as defined in 24 CFR 8.3 or with a developmental disability as defined under 24 CFR 578.3 are exempt. Examples of services or activities include case management, counseling, education, job training, community-building activities, etc. Employment may contribute to the 20 hours per week of engagement.

21. Describe how the proposed project will assess the service needs of program participants. (max. 1,000 characters)

22. Will the proposed project create service plans for each program participant?

○ Yes ○ No

Service plans should include services to be provided, when and how often services will be provided, by whom all services will be provided, participant goals, strategies for achieving those goals, and target dates for achievement to focus on improved health and wellness, housing stability, and increased employment income.

23. Connection to mental health services, local crisis system of care, and outpatient mental and substance use treatment (max. 2,000 characters)

Describe how the project will:

1. Provide or link participants to outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports;

2. Provide or link participants to peer recovery specialists or other forms of peer support and recovery navigation;

3. Identify individuals experiencing Serious Mental Illness and connect them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment; and

4. Support linkage to the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services

24. Will the proposed project have on-site substance use treatment available?
○ Yes ○ No

25. In accordance with 24 CFR 578.93(b)(5), will the proposed project operate as "sober housing" by excluding persons who refuse to sign an occupancy agreement or lease that prohibits program participants from possessing, using, or being under the influence of illegal substances and/or alcohol on the premises?
○ Yes ○ No
24 CFR 578.93(b)(5)

26. McKinney-Vento Education Requirements

Applicants requesting funds to provide housing or services to children and youth, with or without families, must establish policies and practices that are consistent with and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, et seq.), and other laws (e.g. Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Projects serving households with children or youth must have a staff person that is designated to ensure children or youth are enrolled in school and connected to the appropriate services within the community.

Failure to comply with federal education assurances may result in Federal sanctions and significantly reduce the likelihood of receiving funding through the CoC Program Competition.

Acknowledgement
☐ Please check the box to acknowledge the proposed project will meet the above requirements if it has any qualifying participants.

27. Available Supportive Services

For all supportive services available to participants, indicate who will provide them and how often they will be provided. Do not limit this selection to just supportive services for which CoC Program funding may be requested in your project application–also include supportive services other organizations or grants will provide. If a supportive service is not included from the list, it will be assumed that this service will not be offered to program participants.

Supportive Services	Provider	Frequency

28. Additional Supportive Services Narrative (Optional) (max. 1,000 characters)

Please provide any additional information related to supportive services that will be provided to program participants.

29. Housing Type and Location

Housing Type	Total Units	Total Beds

Project Address

Address Line 1

Address Line 2

City	State	Zip Code

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For scattered site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. If the address for scattered site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

30-31. Project Milestones & Timeliness

30. Project Milestones

Please include all four project milestones from the dropdown menu provided. Enter the number of days from the execution of the grant agreement that each milestone will occur as related to CoC Program funds requested in this project application.

Note: *To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award.*

Project Milestone	Days from Execution of Grant Agreement

31. Project Readiness (max. 1,000 characters)

Please describe the plan for rapid implementation of the project upon contract execution (if awarded). This should include plans to ensure the project is fully staffed, enrollments begin, and staff support participants in rapid placement into TH.

32-34. Budget

31. Funding Request

Estimated DV Bonus Funding Available: $600,000

Maximum Budget per DV Bonus Transitional Housing Project Application: $600,000

The information included in this funding request should be for CoC dollars only. If the project will leverage non-CoC resources, indicate this in the budget narrative section.

Indirect Cost Rate

○ Yes ○ No

Does this project propose to allocate funds according to an indirect cost rate?

Funding Request

☐ Leased Units (scattered-site and site-based projects)

☐ Supportive Services (scattered-site and site-based projects)

☐ Leased Structures (scattered-site and site-based projects)

☐ VAWA (scattered-site and site-based projects)

☐ Operating Costs (scattered-site and site-based projects)

☐ HMIS (scattered-site and site-based projects)

Select the budget categories for which funding is being requested.

32. Match

Sources of Match Detail

Type of Commitment	Type of Source	Name of Source Commitment	Value of Written Commitment

$0.00

Total Value of Cash Commitments	Total Value of In-Kind Commitments

Program Income as Match
○ Yes ○ No
Will this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?

33-37. Budget Summary

33. Budget Detail

Please indicate the total assistance requested for each program activity as requested in previous sections.

*This information **MUST MATCH** the total assistance requested for each budget category calculated in the previous sections. Conflicting budget information will result in the loss of points during the evaluation process. Agencies must request the full amount available for administrative costs (10% of the project's subtotal costs), which will be split evenly with the City if awarded by HUD.*

Eligible Costs	Total Assistance Requested for Grant Term

Total Assistance Plus Admin Requested: $0.00

Cash Match

In-Kind Match

Total Match
$0.00
Your total match must equal 25% of the total assistance being requested, excluding leasing costs.

Total Budget (including match)
$0.00

34. Budget Narrative (Optional) (max. 2,000 characters)

Please provide any additional information relevant to the proposed budget, including funding to be leveraged to support the program from other public/private sources and/or justification for the basis of certain proposed costs in the budget.

35. Will the average cost per household served be reasonable, consistent with 2 CFR 200.404?
○ Yes ○ No
Link to 2 CFR 200.404

36. Other Government Assistance

○ Yes ○ No

Will your organization receive any other government assistance (federal, state, local) that will be involved in the proposed project?

37. Interested Parties

*Applicants **must disclose:***

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity; and

2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds $50,000 or 10 percent of the assistance (whichever is lower).

If there are no parties with a financial interest in the project, please indicate N/A.

First and Last Name	Type of Participation	Financial Interest ($)	Financial Interest (%)

Attachments

Attachments

Please attach all required supporting documentation and other relevant materials related to your application.

SAM Registration
Please upload documentation providing evidence that your organization has active SAM clearance at the time of application submission.

HUD 50070 Drug Free Workplace
Access the form here: https://www.hud.gov/sites/documents/50070.PDF

Nonprofit Documentation (if applicable)
Nonprofit status is documented by submitting either: (1) a copy of the Internal Revenue Service (IRS) final determination letter providing tax-exempt status under Section 501(c)(3) of the IRS Code (preferred); or (2) a certification from a licensed CPA that the organization meets each component of the definition of a private nonprofit organization as defined by 24 CFR 578.3.

Negotiated Indirect Cost Rate (if applicable)
Project applicants requesting to utilize a federally negotiated indirect cost rate for billing must attach an approved agreement from their cognizant agency.

Certification

Does Everything Look Right?

Please review your application for completeness and accuracy.

Once you submit, you will no longer be able to make changes or edits to your application.

Submit

Renewal Application Certification

Authorization

☐ The above-named applicant hereby submits a project application for inclusion in the City of Pasadena FY 2026 Consolidated Application for the Department of Housing and Urban Development Continuum of Care (CoC) Homeless Assistance Program competition. The representative listed below, on behalf of the above-named applicant, certifies that: The information, statements, and attachments included in this renewal project application are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this renewal project application on behalf of the entity identified in the signature block.

Name of Authorized Representative **Title**

First Last

Signature of Authorized Representative **Date**