



YHDP Round 6

New Project Application

May 23rd, 2023

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Introduction

- Learning Objectives:
 - Navigate to the project application in *e-snaps*
 - Complete the application formlets (i.e., screens)
 - Submit the project application
- Communication during Zoom
 - Use the chat box
- Questions
 - Chat box
 - TA providers
 - youthdemo@hud.gov
 - HUD Exchange AAQ – application questions, select “*e-snaps*”
<https://www.hudexchange.info/program-support/my-question/>



Agenda

- Overview of application deadlines
- Resources
- Accessing the Project Application in *e-snaps*
- Application requirements
- Application submission



Overview of Application Deadlines

Deadline	Action
May 15, 2023 for UFAs	Final date to submit applications to ensure July 1, 2023 start date
July 1, 2023	Final date to submit applications to receive funds in FY 2023 funding cycle (which ends 9/30/23)

Questions? Email the Youth demo mailbox at youthdemo@hud.gov



Resources

- CoC Program interim rule
<https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>
- YHDP Application Resources page:
https://www.hud.gov/program_offices/comm_planning/yhdp
- FY 2021 YHDP NOFA
 - [YHDP R6– New Project Application – HUD Detailed Instructions](#)
 - [YHDP R6– New Project Application – Navigational Guide](#)
- e-snaps resources page: <https://www.hudexchange.info/programs/e-snaps/>
- Your TA Provider
- HUD Exchange AAQ – *e-snaps*
<https://www.hudexchange.info/program-support/my-question/>

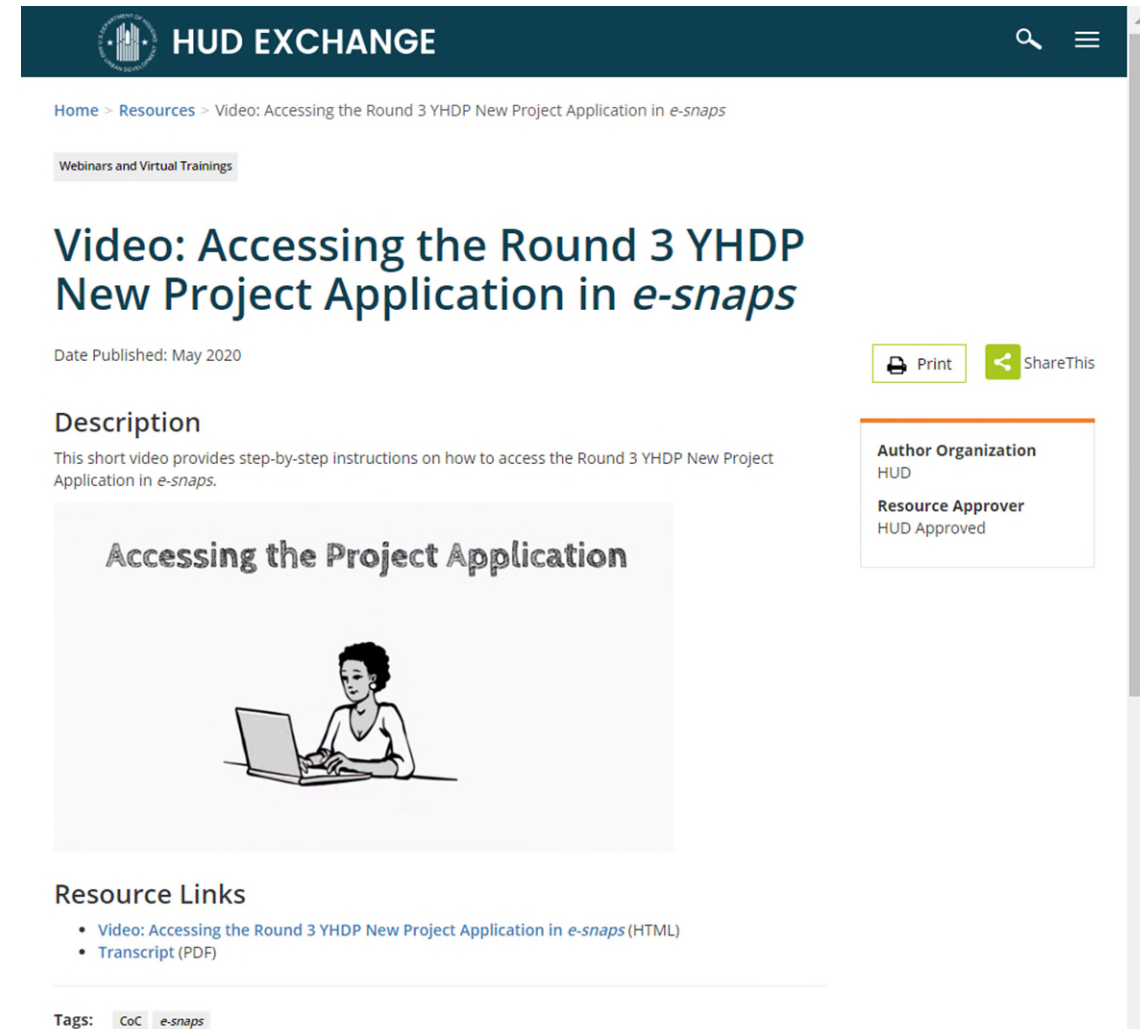


Video – Accessing the YHDP Project Application in e-snaps

- Navigate the process from creating a user login and password to accessing the project application screens
- Access from the FY 2018 YHDP Application Resources page

<https://www.hudexchange.info/programs/yhdp/fy-2018-yhdp-application-resources/>

- The video is from Round 3, but the process is still the same in e-snaps. Funding Opportunity for Round 6 is “YHDP New Project Application FY 2021”



The screenshot shows the HUD Exchange website interface. At the top, there is a dark green header with the HUD Exchange logo and the text 'HUD EXCHANGE'. Below the header, a breadcrumb trail reads 'Home > Resources > Video: Accessing the Round 3 YHDP New Project Application in e-snaps'. A category tag 'Webinars and Virtual Trainings' is visible. The main title of the page is 'Video: Accessing the Round 3 YHDP New Project Application in e-snaps'. Below the title, it says 'Date Published: May 2020'. There are 'Print' and 'ShareThis' buttons. The 'Description' section states: 'This short video provides step-by-step instructions on how to access the Round 3 YHDP New Project Application in e-snaps.' Below the description is a video thumbnail with the title 'Accessing the Project Application' and an illustration of a woman at a laptop. To the right of the video is a box for 'Author Organization HUD' and 'Resource Approver HUD Approved'. The 'Resource Links' section contains two links: 'Video: Accessing the Round 3 YHDP New Project Application in e-snaps (HTML)' and 'Transcript (PDF)'. At the bottom, there are 'Tags: CoC e-snaps'.

Create a User Profile and Log In to *e-snaps*

- *e-snaps* login page: <https://esnaps.hud.gov/grantium/frontOffice.jsf>
- User profile = Username and Password
- Create a Profile if you are a first-time user

Front Office Portal
Accessing the Round 3 YHDP New Project Application in e-snaps

Welcome to e-snaps

Welcome to **e-snaps**! **E-snaps** is the application and grants management system for the HUD Continuum of Care (CoC) Program. It supports the collaborative application process known as the CoC Program Competition.

The **e-snaps** system is to be used by authorized persons only. If you are an authorized user, please log in by entering a valid user name and password. If you have any difficulty with this process please contact the System Administrator. You may also use the Links on the left menu to navigate through the system, and access application forms and other related links. If you need assistance in navigating the system please access the Help instructions in each section.

If you are not yet an authorized user, and need access to this system on behalf of your Continuum of Care or as a project applicant, you may request a user name through the Registration process.

The information collection requirements contained in this application have been submitted to the Office of Management and Budget (OMB) for review under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Information is submitted in accordance with the regulatory authority contained in each program rule. The information will be used to rate applications, determine eligibility, and establish grant amounts.

Selection of applications for funding under the Continuum of Care Program are based on rating factors listed in the Notice of Fund Availability (NOFA), which is published each year to announce the Continuum of Care Program funding round. The information collected in the application form will only be collected for specific funding competitions.

Forgot your password?

Create Profile

Contact Us

CoC Program Registration: OMB Approval No. 2506-0182 (exp. 01/31/2018)

- Access organization's *e-snaps* account
(Add/Delete Registrants)

<https://www.hudexchange.info/resource/2903/adding-deleting-registrants-in-esnaps/>

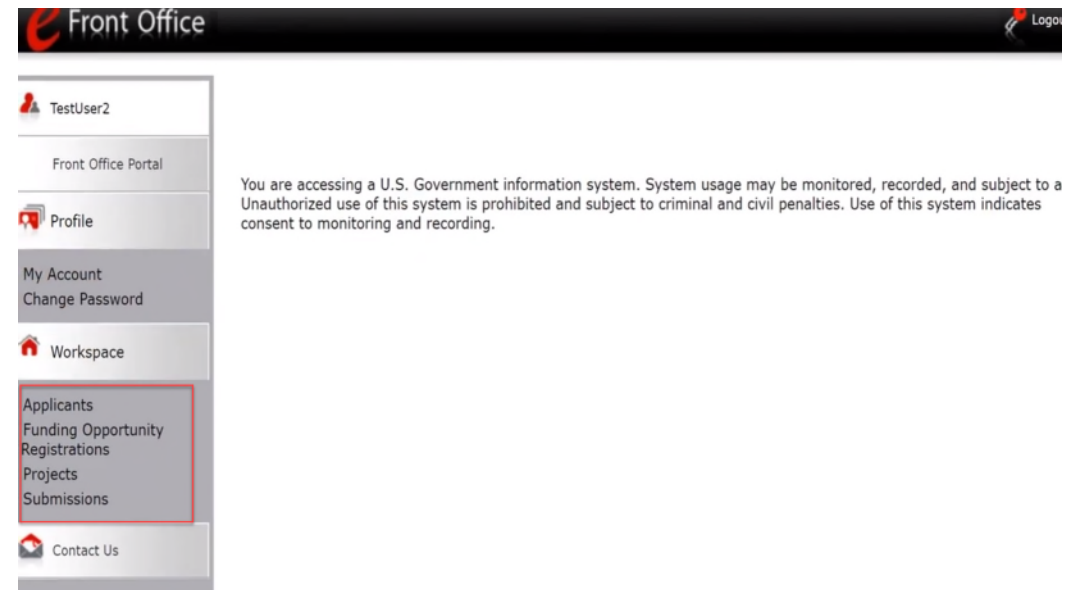


Navigate Within *e-snaps*

Accessing the Project Application



- 1** Ensuring the Project Applicant Profile is in "Complete" status
- 2** Selecting the appropriate Funding Opportunity
- 3** "Creating" - or establishing - the Project Application
- 4** Accessing and opening the Project Application on the "Submissions" screen



The screenshot shows the 'Front Office' portal. At the top, there is a black header with the 'e' logo and the text 'Front Office'. Below the header, a user profile section shows 'TestUser2' and 'Front Office Portal'. A navigation menu on the left includes 'Profile', 'My Account Change Password', 'Workspace', and a red-bordered box containing 'Applicants', 'Funding Opportunity', 'Registrations', 'Projects', and 'Submissions'. At the bottom of the menu is 'Contact Us'. To the right of the menu, a disclaimer states: 'You are accessing a U.S. Government information system. System usage may be monitored, recorded, and subject to a Unauthorized use of this system is prohibited and subject to criminal and civil penalties. Use of this system indicates consent to monitoring and recording.'



Step 1. Complete the Applicant Profile

- Applicant Profile = the organization = Project Applicant (not an individual)
 - Existing = has applied for funds via *e-snaps* before, has a Profile
 - New = has NEVER applied via *e-snaps* before, creates a Profile (<https://www.hud.gov/sites/dfiles/CPD/documents/FY-2021-YHDP-New-Project-Application-Navigational-Guide.pdf>)
- Registered user = *e-snaps* recognizes that your user profile is connected to an organizational Applicant Profiles
- Submission Summary screen = “This e.Form has been marked as complete”

Complete	Page	Last Updated	Mandatory
✓	1. Profile Type	04/05/2019	Yes
✓	2. Organization Information	06/29/2017	Yes
--	3. Contact Information	No Input Required	No
✓	Authorized Representative	06/19/2018	Yes
✓	Alternate Contact	12/17/2018	Yes
✓	4. Additional Information	06/15/2017	Yes
--	5. Forms & Attachments	No Input Required	No
✓	HUD Form 2880	09/07/2017	Yes
--	Code of Conduct	No Input Required	No
--	Nonprofit Document	No Input Required	No
--	Survey on EEO	No Input Required	No
--	Other Attachment	No Input Required	No

Step 2. Register for the Funding Opportunity

- Funding Opportunity Registration = intent to apply
- One for each type of funds = YHDP New Project Application FY 2021
- (During CoC Program Competition = Renewal, New, CoC planning, UFA, YHDP Renewal, YHDP Replacement)

The screenshot displays the 'Front Office' web application interface. On the left is a navigation sidebar with links for 'Front Office Portal', 'Profile', 'My Account', 'Workspace', 'Applicants', 'Funding Opportunity Registrations', 'Projects', 'Submissions', and 'Contact Us'. The main content area shows the 'Applicant' dropdown set to 'Help the People (123456789012356)'. Below this, the 'Funding Opportunity Details' section lists: 'Funding Opportunity Name: YHDP New Project Application FY2021', 'Start Date: 2023-03-06 00:00:00.0', and 'End Date: 2025-04-30 23:59:00.0'. The 'Funding Opportunity Registration' section contains a confirmation message: 'Are you sure you wish to register Help the People (123456789012356)?' with 'Yes' and 'Cancel' buttons. The footer includes 'Page Generation Time: 0.709s', a 'Grantium' logo, and logos for the 'U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT' and 'COMMUNITY PLANNING DEVELOPMENT'.

Step 3. Create a Project

Applicant: Interior Alaska Center for Non-Violent Living (92-0063639)

Project Status: Open Projects

Funding Opportunity Name: YHDP New Project Application FY2021

Project Name	Project Number	Funding Opportunity Name	Applicant Name	Applicant Number	Step Status
2019_new_2	138078	YHDP New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
FY2021		YHDP New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
FY2021		YHDP New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
FY2021		YHDP New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress

Add icon appears after selection in dropdown menu

- Create a project = establish a project application
- Use the project's name
- Access the actual application on a different screen = the Submissions screen

Applicant: Interior Alaska Center for Non-Violent Living (92-0063639)

Create a Project

Funding Opportunity Name: YHDP New Project Application FY2021

Applicant: Interior Alaska Center for Non-Violent Living (92-0063639)

Applicant Project Name:

Save Save & Add Another

Save & Back Cancel

Enter the Project Name. E-snaps will assign a project number

Applicant: Interior Alaska Center for Non-Violent Living (92-0063639)

Project Status: Open Projects

Funding Opportunity Name: All Funding Opportunities

Edit	Project Name	Project Number	Funding Opportunity Name	Applicant Name	Applicant Number	Step Status
	2019_new_560	136362	Renewal Project Application FY2019	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2019		YHDP New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2020		YHDP Planning Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2020		YHDP Renewal Project Application FY2020	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2020	136045	Renewal Project Application FY2020	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2020_new_2	136160	Renewal Project Application FY2020	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2021_AK_YHDP_REN_1	137160	Renewal Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2021_new_1	137626	New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2021_new_2	137627	New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress
	2021_new_1	137626	New Project Application FY2021	Interior Alaska Center for Non-Violent Living	92-0063639	In Progress

Select YHDP New Project Application FY2021

Step 4. Access the Project Application formlets

- On the Submissions screen on the left menu bar, access the project application that you created on the Projects screen in Step 3
- Screens = formlets

2. Confirm the correct applicant

3. Use the filters to find the correct project

1. Select Submissions

Actions	Project Name Project Number	Funding Opportunity Name Step Name	Start Date	End Date	Associate Type	Version	Date Submitted
	FY2021_YHDP_New_App_3 138879	YHDP New Project Application FY2021 YHDP New Project Application FY2021	Mar 6, 2023	Apr 30, 2025	Primary Applicant	1	

4. Access the project application

Page Generation Time: 0.914s

Granti

Part 1: SF-424

- HUD form SF-424
 - Complete in its entirety prior to seeing the remainder of the application

The screenshot displays the 'e.Forms' application interface. At the top, the 'e.Forms' logo is on the left, and the user 'brendakays' is logged in on the right. The main content area is titled 'Before Starting the Project Application'. It contains a list of instructions for applicants, including links to HUD Exchange resources and a list of 'Things to Remember'. At the bottom of the instructions are 'Back' and 'Next' buttons. On the left side of the interface, there is a sidebar menu with a 'Before Starting' section highlighted in a rounded rectangle. This section lists various forms, with 'Part 1 - Forms' and its sub-items (1A through 1K) being the focus of the presentation.

e.Forms brendakays Logout

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/> and <https://www.hudexchange.info/programs/yhdp/>.
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD via the Youth Demo Mailbox; YouthDemo@hud.gov.
- Project applicants are required to have a Universal Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Years (FY) 2021 & 2022 Youth Homeless Demonstration Program (YHDP). For more information see FY 2021/2022 YHDP NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021/2022 YHDP NOFO and the Appendices.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which will be shared via email from HUD SNAPS.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any YHDP project that fails to adhere to (24 CFR part 578) and application requirements set forth in FY 2021/2022 YHDP NOFO.

Back Next

Before Starting

- Part 1 - Forms
 - 1A. SF-424 Application Type
 - 1B. SF-424 Legal Applicant
 - 1C. SF-424 Application Details
 - 1D. SF-424 Congressional District(s)
 - 1E. SF-424 Compliance
 - 1F. SF-424 Declaration
 - 1G. HUD 2880
 - 1H. HUD 50070
 - 1I. Cert. Lobbying
 - 1J. SF-LLL
 - 1K. SF-424B

Part 1: SF-424

- Pre-populated data from the Applicant Profile
 - Correct Errors in the Applicant Profile (e-snaps resource: [Putting the Applicant Profile in Edit-Mode](#))

eForms

KBECK Logout

YHDP New Project Application FY2021

Applicant Name: Saint Louis County Project Applicant
Applicant Number: MO-500 Project Applicant
Project Name: FY2021 YHDP Version 3
Project Number: 138134

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting Part 1 - Forms

1A. SF-424 Application Type

1B. SF-424 Legal Applicant

1C. SF-424 Application Details

1D. SF-424 Congressional District(s)

1E. SF-424 Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

1I. Cert. Lobbying

1J. SF-LLL

1K. SF-424B

8B. Summary

View Applicant Profile

Export to PDF
Get PDF Viewer

Back to Submissions List

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Arlen Housing Services

b. Employer/Taxpayer Identification Number (EIN/TIN): 12-1234567

c. UEI: 123456789012

d. Address

Street 1: 1234 Main St

Street 2:

City: St. Louis

County: St. Louis

State: Missouri

Country: United States

Zip / Postal Code: 60000

e. Organizational Unit (optional)

Department Name: Human Services

Division Name: Homeless Services

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Wilma

Middle Name:

Last Name: Flagstone

Suffix: -- select --

Title: Program Manager, Homeless Services

Organizational Affiliation: Arlen Housing Services

Telephone Number: (314) 555-5555

Extension:

Fax Number: (314) 555-5555

Email: jane@123.org

Back Next

Verify the data is accurate

NOTE: This section populates the Alternate Contact from the Applicant Profile.

HUD Form 2880

- Project Application Part 1, and Project Applicant Profile
- How to Complete the 2880 in e-snaps

<https://www.hudexchange.info/resource/5595/how-to-complete-the-hud-form-2880-in-e-snaps/>

e.Forms KBECK Logout

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name:

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Title:

Organizational Affiliation:

Telephone Number:

Extension:

Email:

City:

County:

State:

Country:

Zip/Postal Code:

2. Employer ID Number (EIN):

3. HUD Program:

4. Amount of HUD Assistance Requested/Received:

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.
Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? (For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the ...

Subrecipients

- Recipient
 - ✓ Grant agreement
 - ✓ Applicant Profile – ONLY ONE

- Subrecipient
 - X Does **NOT** have Grant agreement with HUD
 - ✓ Subrecipient agreement with the recipient

 - X Does **NOT** have an Applicant Profile
 - ✓ Recipient can give access to staff to assist with application



2A. Subrecipient Detail

- One entry for each subrecipient

eForms | brendakays | Logout

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_2
Project Number: 138076

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant
1C. SF-424 Application Details
1D. SF-424 Congressional District(s)
1E. SF-424 Compliance
1F. SF-424 Declaration
1G. HUD 2880
1H. HUD 50070
1I. Cert. Lobbying
1J. SF-LLL
1K. SF-424B
Part 2 - Recipient and Subrecipient Information
2A. Subrecipients
2B. Experience
Part 3 - Project Information
3A. Project Detail

2A. Project Subrecipients Detail

a. Organization Name:

b. Organization Type: -- select --
If "Other" specify:

c. Employer or Tax Identification Number:

d. Organizational DUNS: PLUS 4:

e. UEI:

f. Physical Address
Street 1:
Street 2:
City:
State: -- select --
Zip Code:

g. Congressional District(s):
(for multiple selections hold CTRL key)

Available Items:
AK-000
AL-001
AL-002
AL-003
AL-004
AL-005
AL-006
AL-007

Selected Items:

- Organizational information

Demonstration Projects
Special YHDP Activities
Part 4 - Housing, Services, and HMIS
4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type
Part 5 - Participants
5A. Households
5B. Subpopulations
Part 6 - Budget Information
6A. Funding Request
6J. Match
6K. Summary Budget
Part 7 - Attachment(s) & Certification
7A. Attachment(s)
7D. Certification
Part 8 - Submission Summary
8B. Summary

[View Applicant Profile](#)

Export to PDF
Get PDF Viewer

[Back to Submissions List](#)

h. Is the subrecipient a Faith-Based Organization? -- select --

i. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? -- select --

j. Expected Sub-Award Amount:

k. Contact Person
Prefix: -- select --
First Name:
Middle Name:
Last Name:
Suffix: -- select --
Title:
E-mail Address:
Confirm E-mail Address:
Phone Number:
Extension:
Fax Number:

Note: All projects must have Subrecipient non-profit documentation attached to their application prior to submission.

Save Save & Add Another
Save & Back to List Back to List

2B. Applicant and Subrecipient Experience

- Applies to you, the applicant
 - Narrative descriptions of experience
- If subrecipients, then include subrecipient experience

The screenshot displays the 'e.Forms' application interface. On the left is a navigation sidebar with a tree view of application sections. The main content area is titled '2B. Experience of Applicant, Subrecipient(s), and Other Partners'. It contains five numbered questions, each with a text input field and a 'Save & Next' button. Question 1 asks about experience in utilizing federal funds. Question 2 asks about leveraging various sector funds. Question 3 asks about financial management structure. Question 4 is a yes/no question about unresolved HUD monitoring or audit findings. Question 5 asks about experience in providing housing and services to BIPOC populations. At the bottom of the form are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'. The top right of the interface shows the user's name 'brendskays' and a 'Logout' link.

e.Forms brendskays Logout

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant
1C. SF-424 Application Details
1D. SF-424 Congressional District(s)
1E. SF-424 Compliance
1F. SF-424 Declaration
1G. HUD 2880
1H. HUD 50070
1I. Cert. Lobbying
1J. SF-LLL
1K. SF-424B

Part 2 - Recipient and Subrecipient Information
2A. Subrecipients
2B. Experience

Part 3 - Project Information
3A. Project Detail
3B. Description
Youth Homeless Demonstration Projects
Special YHDP Activities

Part 4 - Housing, Services, and HMIS
4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type

Part 5 - Participants
5A. Households
5B. Subpopulations

Part 6 - Budget Information
6A. Funding Request

2B. Experience of Applicant, Subrecipient(s), and Other Partners

* 1. Describe your organization's (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

d

* 2. Describe your organization's (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

d

* 3. Describe your organization's (and subrecipient(s) if applicable) financial management structure.

d

* 4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? No

* 5. Describe the experience of the applicant and potential subrecipients (if any) in providing housing and services to Black, Indigenous, People of Color (BIPOC) experiencing homelessness.

d

Save & Back Save Save & Next

Back Next

3A. Project Detail

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
 Applicant Number: 92-0063639
 Project Name: FY2021_YHDP_New_App_3
 Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
 Part 1 - Forms
 1A. SF-424 Application Type
 1B. SF-424 Legal Applicant
 1C. SF-424 Application Details
 1D. SF-424 Congressional District(s)
 1E. SF-424 Compliance

3A. Project Detail

* 1a. CoC Number and Name: NV-502 - Nevada Balance of State CoC

* 2. CoC Collaborative Applicant Name:

3. Project Name:

* 4. Project Status:

* 5. Component Type:

* 5a. Select the type of PH project:

* 6. Does this project include Replacement Reserves?

Component (6)	Acronym
Permanent Housing	PH
Transitional Housing	TH
Joint Transitional Housing and Permanent Housing-Rapid Rehousing	Joint TH and PH: RRH
Safe Havens	SH
Homeless Management Information Systems	HMIS
Supportive Services Only	SSO

Permanent Supportive Housing	PSH
Rapid Rehousing	RRH

SSO Coordinated Entry	SSO-CE
SSO non-Coordinated Entry	SSO non-CE



3B. Project Description

- Information required on: project description, milestones, target population, coordinated entry participation, and housing
- Project Description broken out into 5 narrative fields
- Read the HUD Detailed Instructions!!
- HOW you answer is different depending on the project type

<https://files.hudexchange.info/resources/documents/YHDP-Round-3-New-Project-Application-Detailed-Instructions.pdf>

The screenshot shows the eForms application interface for the YHDP New Project Application FY2021. The user is logged in as 'brendakays'. The main section is titled '3B. Project Description'. The application details on the left include: Applicant Name: Interior Alaska Center for Non-Violent Living; Applicant Number: 92-0063639; Project Name: FY2021_YHDP_New_App_3; Project Number: 138079. The navigation menu lists sections: YHDP New Project Application FY2021, FY2019 New Detailed Instructions, Before Starting, Part 1 - Forms (1A. SF-424 Application Type, 1B. SF-424 Legal Applicant, 1C. SF-424 Application Details, 1D. SF-424 Congressional District(s), 1E. SF-424 Compliance, 1F. SF-424 Declaration, 1G. HUD 2880, 1H. HUD 50070, 1I. Cert. Lobbying, 1J. SF-LLL, 1K. SF-424B), Part 2 - Recipient and Subrecipient Information (2A. Subrecipients, 2B. Experience), Part 3 - Project Information (3A. Project Detail).

The '3B. Project Description' section contains five narrative fields, each with a question and a text input area:

- * 1. Provide a description that addresses the entire scope of the proposed project. (Input: h)
- * 1a. Provide a description that addresses how this project will follow Positive Youth Development. (Input: g)
- * 1b. Provide a description that addresses how this project will follow Trauma Informed Care. (Input: g)
- * 1c. How does this project help the community meet the shared vision, goals and objectives of the coordinated community plan? (Input: g)
- * 1d. Describe how this project will ensure that all participants (including BIPOC, LGBTQIA+, etc) have equitable outcomes in the project and how the project will monitor these outcomes. (Input: g)

Field 2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

3B. Project Description:

Question 1 – 1d: Project Description

- Regular requirement
 - Entire scope of the proposed project, target population, plan for identifying housing/service needs, coordination with other organizations
- PSH, RRH, TH, JOINT and SSO non-CE
 - Incorporate positive youth development (PYD) and trauma informed care (TIC) into the project; community partnerships; measures and outcomes
- Joint:
 - YHDP for both TH and RRH; if not both, detailed information if non-HUD funding will support one component (TH or RRH)
- SSO-CE
 - Role in the coordinated community response; implementation of the youth-specific component of CE process; incorporate PYD and TIC
- HMIS
 - Implement or expand youth specific HMIS system components (e.g., adding youth-specific data standards); develop YHDP specific reports); add youth organizations to the HMIS

3B. Project Description: Question 5: Housing First

5. Housing First

* a. Will the project quickly move participants into permanent housing

* b. Does the project ensure that participants are not screened out based on the following items? Select all that apply.

Having too little or little income	<input type="checkbox"/>
Active or history of substance use	<input type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input type="checkbox"/>
None of the above	<input type="checkbox"/>

* c. Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply.

Failure to participate in supportive services	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input type="checkbox"/>
None of the above	<input type="checkbox"/>

* d. Will the project follow a "Housing First" approach?
(Click 'Save' to update)

- Question 5. Housing First
- Answer 5a, 5b, and 5c
- 5d will auto-populate based on responses



3B. Project Description: Question 9a-9g: SSO Projects

9. As a SSO-Coordinated Entry project answer the following questions:

* 9a. Will the coordinated entry process cover the CoC's entire geographic area?

* 9b. Will the coordinated entry process be affirmatively marketed and easily accessible by program participants seeking assistance?

* 9c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.

* 9d. Will the coordinated entry process use a comprehensive, standardized assessment process?

* 9e. Describe the standardized assessment and referral process that directs individuals and families to appropriate housing and services.

* 9f. If the coordinated entry process includes differences in access, entry, assessment, or referral for certain subpopulations, are those differences limited only to the following five groups: (1) adults without children;
(2) adults accompanied by children;
(3) unaccompanied youth;
(4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking);
and
(5) persons at risk of homelessness?

* 9g. Will coordinated entry project refer program participants to projects that specifically coordinates and integrates mainstream health, social services, and employment programs for which they may be eligible?

Save & Back Save Save & Next

Back Next

Check Spelling

- SSO: question 9 is about SSO-CE ONLY. These questions will only appear for SSO-CE.



Note: This formlet contains mandatory fields for which no value has been saved.

3B. Project Description: Question 9: PSH Projects

Dedicated and DedicatedPLUS

A "100% Dedicated" project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A "DedicatedPLUS" project is a permanent supportive housing project where 100% of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (1) experiencing chronic homelessness as defined in 24 CFR 578.3;
- (2) residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
- (3) residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
- (4) residing in transitional housing funded by a joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
- (5) residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
- (6) receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

* 9. Indicate whether the project is "100% Dedicated," or "DedicatedPLUS," according to the information provided above.

- PSH: question 9 is about DedicatedPlus
- YHDP projects do not need to be DedicatedPLUS



Racial Equity Questions

- New questions related to racial equity in the YHDP project application
- All questions are required to be answered
- If you have questions, please send to youthdemo@hud.gov

10. Effectively serving youth populations

* 10a. Describe the racial composition of the persons or households who are expected to benefit from your proposed grant activities, including a description of how you analysed the local population to determine this.

b

* 10b. Identify any potential barriers to persons or communities of color equitably benefiting from your proposed grant activities.

bb

* 10c. Detail the steps you will take to prevent, reduce or eliminate these barriers.

b

* 10d. Describe the measures in place to track progress and evaluate the effectiveness of efforts to advance racial equity through the grant activities.

b

Save & Back

Save

Save & Next

Back

Next

Youth Homelessness Demonstration Project

YHDP New Project
Application FY2021

Applicant Name:
Interior Alaska Center for
Non-Violent Living
Applicant Number:
92-0063639
Project Name:
FY2021_YHDP_New_App_
3
Project Number:
138079

YHDP New Project
Application FY2021

FY2019 New Detailed
Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application
Type
1B. SF-424 Legal
Applicant
1C. SF-424 Application
Details
1D. SF-424
Congressional District(s)
1E. SF-424 Compliance
1F. SF-424 Declaration
1G. HUD 2880
1H. HUD 50070
1I. Cert. Lobbying
1J. SF-LLL
1K. SF-424B

Part 2 - Recipient and
Subrecipient Information
2A. Subrecipients
2B. Experience

Part 3 - Project
Information
3A. Project Detail
3B. Description

**Youth Homeless
Demonstration
Projects**

Special YHDP Activities

Part 4 - Housing,
Services, and HMIS
4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type

Part 5 - Participants
5A. Households
5B. Subpopulations

Part 6 - Budget
Information
6A. Funding Request
6B. Aco/Rehab/Const
6C. Leased Units
6D. Leased Structures

Youth Homeless Demonstration Projects

* 1. Does this project carry out housing problem solving activities to divert or rapidly exit households from homelessness? Yes

* 1a. Describe the intervention strategy to engage families and how community partnerships such as child welfare agencies, schools, youth providers, and other community service and homeless providers are incorporated into the intervention strategy?
b

* 1b. What services are provided to engage the family and youth? (You may select more than one)

Family counseling	<input type="checkbox"/>
Conflict Resolution	<input checked="" type="checkbox"/>
Parenting Supports	<input type="checkbox"/>
Relative or kinship caregiver resources	<input type="checkbox"/>
Targeted substance abuse and mental health treatment	<input type="checkbox"/>
Housing Search Assistance	<input type="checkbox"/>
Landlord-Tenant mediation	<input type="checkbox"/>
Legal Services	<input type="checkbox"/>
Utility or Security Deposits	<input type="checkbox"/>
One time moving assistance	<input type="checkbox"/>
Rental Application fees	<input type="checkbox"/>
Utility or Rental Arrears	<input type="checkbox"/>
Other (if other selected, use textbox to explain the potential service)	<input type="checkbox"/>

* 2. Is this a Host Homes Project? Yes

* 2a. If Yes, how will this project recruit hosts?
n

* 2b. How will this project match youth with hosts?
m

* 2c. What services will be provided to ensure the host home is successful?
m

* 2d. At project capacity, how many youths will be in host homes?
m

This screen has been updated with new questions related to Host Homes (#2)

* 3. Does this project plan to use Rental Assistance? Yes

* 3a. Will this project use Rental Deposits? No

* 3b. Will this project cover first months rent? Yes

* 3c. Short Term Rental Assistance: Yes

* 3d. Medium Term Rental Assistance: Yes

* 4. How will the community continue to involve the Youth Action Board (YAB) in the development and implementation of YHDP projects?
m

* 5. Will your project offer any specialized services for youth living with HIV/AIDS? No

Save & Back Save Save & Next

Back Next

Special YHDP Activities

e.Forms brendakays Logout

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project

Special YHDP Activities

* 1. Is the YHDP New Project Applicant requesting a special YHDP activity, Exemption or Innovative Activity?

Note: This formlet contains mandatory fields for which no value has been saved.

Default is "select" when you arrive to this screen

e.Forms brendakays Logout

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number:

Special YHDP Activities

* 1. Is the YHDP New Project Applicant requesting a special YHDP activity, Exemption or Innovative Activity?

If "Yes" selected, the full list of Special YHDP Activities will populate



Special YHDP Activities

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living

Applicant Number: 92-0063639

Project Name: FY2021_YHDP_New_App_3

Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting

Part 1 - Forms

1A. SF-424 Application Type

1B. SF-424 Legal Applicant

1C. SF-424 Application Details

1D. SF-424 Congressional District(s)

1E. SF-424 Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

1I. Cert. Lobbying

1J. SF-LLL

1K. SF-424B

Part 2 - Recipient and Subrecipient Information

2A. Subrecipients

2B. Experience

Part 3 - Project Information

3A. Project Detail

3B. Description

Youth Homeless Demonstration Projects

Special YHDP Activities

* 1. Is the YHDP New Project Applicant requesting a special YHDP activity, Exemption or Innovative Activity?

* 2. Check the appropriate box(es) for the Special YHDP Activity the applicant is requesting. (Select all that apply)

[Reminder, certain activities require a Supportive Services budget connection. Review the Detailed Instructions to learn more.](#)

- 1.C.1.a(1) Leases under 12 months (minimum 1 month) - (ELIGIBLE ONLY FOR PH, TH & JOINT)
- 1.C.1.a(2) Use of leasing, Sponsored Based Rental Assistance (SRA) and Project Based Rental Assistance (PRA) in Rapid Rehousing (RRH) - (ELIGIBLE ONLY FOR PH & JOINT)
- 1.C.1.a(3) Use 10% of total YHDP funding for Planning grants - (ELIGIBLE ONLY FOR PLANNING)
- 1.C.1.a(4) Project admin funds used to employ youth with lived experience for project implementation, execution, and improvement - (ELIGIBLE ONLY FOR PROJECTS WITH AN ADMIN COST BLI)
- 1.C.1.a(5) Project admin funds used to attend non-HUD sponsored or approved conferences (must be relevant to youth homelessness) - (ELIGIBLE ONLY FOR PROJECTS WITH AN ADMIN COST BLI)
- 1.C.1.a(6) Employ youth receiving recipient services (document nature of work and no conflicts of interest) - (ELIGIBLE ONLY FOR PH, TH, JOINT & SSO)
- 1.C.1.a(7) Use habitability standards in 24 CFR 576.403© rather than HQS in 24 CFR 578.75 for up to 24 months of housing assistance (document standards applied to units and proof of compliance) - (ELIGIBLE ONLY FOR PH, TH & JOINT)
- 1.C.1.a(8) Provide moving expense more than one time to a program participant - (ELIGIBLE ONLY FOR PH, TH, JOINT & SSO)
- 1.C.1.a(9) Provide payments for families that provide housing under host homes and kinship care (up to \$500 per month) - (ELIGIBLE ONLY FOR HOST HOME & KINSHIP CARE)

No Special YHDP Activities Requested

Select Activities by clicking checkboxes.

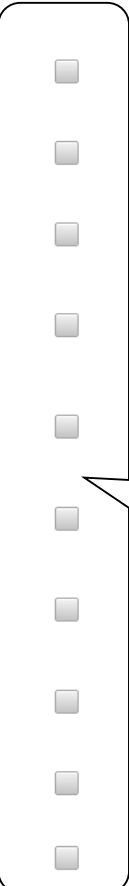
Project Description: Homeless Rehousing Projects

Special YHDP Activities

* 3. YHDP grant funds may be used for the following if they are necessary to assist program participants to obtain and maintain housing. Recipients and subrecipients must maintain records establishing how it was determined paying the costs was necessary for the program participant to obtain and retain housing and must also conduct an annual assessment of the needs of the program participants and adjust costs accordingly. (Select all that apply) - Eligible only to projects with a Supportive Services BLI

- 1.C.1.a(10)(a) Security deposits (not to exceed 2 months of rent) - Covered under the Rental Assistance BLI if included in project, not under Supportive Services
- 1.C.1.a(10)(b) Pay for damage to units (not to exceed 2 months rent) - Covered under the Rental Assistance BLI if included in project, not under Supportive Services
- 1.C.1.a(10)(c) Costs to provide household cleaning supplies
- 1.C.1.a(10)(d) Housing start-up expenses (not to exceed \$300 per participant)
- 1.C.1.a(10)(e) Purchase cell phone and service (cost must be reasonable and housing related)
- 1.C.1.a(10)(f) Cost of Internet (costs must be reasonable)
- None

- 1.C.1.a(10)(g) Payment of rental arrears (up to 6 months)
- 1.C.1.a(10)(h) Payment of utility arrears (up to 6 months)
- 1.C.1.a(10)(i) Payment of utilities (Up to 3 months)
- 1.C.1.a(10)(j) Pay gas a mileage for participant personal vehicle for trips for eligible services
- 1.C.1.a(10)(k) Payment of Legal fees
- 1.C.1.a(10)(l) Payment of insurance, registration and past driving fines



Select checkboxes by clicking on them.



Special YHDP Activities

*** 4. Check the appropriate box(s) for the Special YHDP Activity - Special Activities that require HUD approval. (Select all that apply)**

I.C.1.b(1) A recipient may provide up to 36 months of Rapid Rehousing rental assistance to a program participant if the recipient demonstrates (1) the method it will use to determine which youth need rental assistance beyond 24 months and (2) the services and resources that will be offered to ensure youth are able to sustain their housing at the end of the 36 months of assistance. - (ELIGIBLE ONLY FOR PH-RRH and JOINT)

I.C.1.b(2) YHDP recipients may continue providing supportive services to program participants for up to 24 months after the program participant exits homelessness, transitional housing or after the end of housing assistance if the recipient demonstrates: 1) the proposed length of extended services to be provided; 2) the method it will use to determine whether services are still necessary; and 3) how those services will result in self-sufficiency and ensure stable housing for the YHDP program participant. - (ELIGIBLE ONLY FOR PROJECTS WITH SUPPORTIVE SERVICES BLI)

YHDP recipients may continue providing supportive services to program participants for up to 36 months after the program participant exits homelessness, if the services are in connection with housing assistance, such as the Foster Youth to Independence initiative, or if the recipient can demonstrate that extended supportive services ensures continuity of case workers for program participants. - (ELIGIBLE ONLY FOR PROJECTS WITH SUPPORTIVE SERVICES BLI)

I.C.1.b(3) Recipients will not be required to meet the 25% match requirement if the applicant is able to show it has taken reasonable steps to maximize resources available for youth experiencing homelessness in the community. - (ELIGIBLE FOR ALL PROJECTS)

I.C.1.b(4) Rental assistance may be combined with leasing or operating funds in the same building, provided that the recipient submits a project plan that includes safeguards to ensure that no part of the project would receive a double subsidy. - (ELIGIBLE ONLY FOR PROJECTS WITH RENTAL ASSISTANCE, LEASING OR OPERATING BLI)

I.C.1.b(5) YHDP recipients may provide payments of up to \$1000 per month for families that provide housing under a host home and kinship care model, provided that the recipient can show that the additional cost is necessary to recruit hosts to the program. - (ELIGIBLE ONLY FOR HOST HOMES & KINSHIP CARE)

No Exemptions Requested.

Select checkboxes by clicking on them.

Checkboxes selected for Q4 will have an additional textbox to fill out

Enter required additional information about your YHDP Special Activity Request. Requirements for YHDP Special Activities can be found in the NOFO citation included on this screen. Please answer ALL requirements prior to submission.

*** I.C.1.b(1):**

*** I.C.1.b(2):**

*** I.C.1.b(3):**

*** I.C.1.b(4):**

*** I.C.1.b(5):**

Special YHDP Activities

If you have questions on ANY portion of the Special YHDP Activities, please send your questions to the youth demo mailbox at youthdemo@hud.gov or connect with your assigned TA contact.

Textboxes will appear if additional information is required

5. Innovative Activities I.C.1.b(6)

... a. Is the applicant requesting an innovative activity?

If "Yes", questions 5b-5f will appear.

* Please give a detailed description of your innovative activity.

... b. Will this activity be testing or likely to achieve a positive outcome in at least one of the four core outcomes for youth experiencing homelessness (stable housing, permanent connections, education/employment, and well-being)?

* If no, explain why.

... c. Is the activity cost-effective?

* If no, explain why.

... d. Does the activity conflict with fair housing, civil rights or environmental regulations?

* If yes, explain why.

... e. Is the activity approved by the YAB?

* If no, explain why.

... f. Is the activity approved by the CoC?

* If no, explain why.

Part 4

4A. Supportive Services for Participants (all)

4A. HMIS Standards (HMIS projects only)

4B. Housing Type and Location (all)

4B. HMIS Training (HMIS projects only)



4A. Supportive Services for Participants

- HMIS and SSO-CE: continue to the next screen
- All others: complete the questions

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4A. Supportive Services for Participants

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

n

1a. Describe specific efforts to ensure BIPOC, LGBTQ and people with disabilities experiencing homelessness will be connected to housing of their choice and supported in housing after the assistance has expired.

m

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

m



4A. Supportive Services for Participants

- This chart on 4A must match up with the SS budget chart

4. For all supportive services available to participants, indicate who will provide them and how often they will be provided.
Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	-- select --	-- select --
Assistance with Moving Costs	-- select --	-- select --
Case Management	-- select --	-- select --
Child Care	-- select --	-- select --
Education Services	-- select --	-- select --
Employment Assistance and Job Training	-- select --	-- select --
Food	-- select --	-- select --
Housing Search and Counseling Services	-- select --	-- select --
Legal Services	-- select --	-- select --
Life Skills Training	-- select --	-- select --
Mental Health Services	-- select --	-- select --
Outpatient Health Services	-- select --	-- select --
Outreach Services	-- select --	-- select --
Substance Abuse Treatment Services	-- select --	-- select --
Transportation	-- select --	-- select --
Utility Deposits	-- select --	-- select --

Funding requests on screen 6F. Supportive Services must have a corresponding entry on this screen 4A.

6F. Supportive Services Budget

* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$0
Grant Term		2 Years
Total Request for Grant Term		\$0



4A. Supportive Services for Participants

- As a reminder, HMIS and SSO-CE will skip these questions
- All other component types must answer these questions

6C. Leased Units
6D. Leased Structures
6E. Rental Assistance
6F. Supp Svcs Budget
6G. Operating
6H. HMIS Budget
6J. Match
6K. Summary Budget
Part 7 - Attachment(s) & Certification
7A. Attachment(s)
7D. Certification
Part 8 - Submission Summary
8B. Summary

[View Applicant Profile](#)

Export to PDF
Get PDF Viewer

[Back to Submissions List](#)

* 4. How will the project allow youth the ability to choose the providers and interventions that fit their needs?
n

* 5. How will the project respond to the different needs for service type, intensity, and length of supports for youth?
m

Identify whether the project will include the following activities:

* 6. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes

* 6a. Transportation assistance to clients to attend Youth Action Board (YAB) meetings and other community events? Yes

* 7. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? Yes

* 8. Program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes

* 8a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months? Yes

Save & Back Save Save & Next

Back Next

4A. HMIS Standards

- HMIS dedicated projects will complete
- All else – go to 4B. Housing Type and Location

e.Forms brendakays Logout

4A. HMIS Standards

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the FY 2022 HMIS Data Standard Manual?

2. Does HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Report (APR)/CoC reporting, Consolidated Annual Performance and Evaluation Report (CAPER)/ESG reporting, Longitudinal System Analysis (LSA)/Annual Homeless Assessment Report, System Performance Measures (SPM), and Data Quality Table, etc.).

3. Is your HMIS capable of generating all reports required by Federal partners including HUD, VA, and HHS?

4. Does HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC?

5. Describe your organizations process and stakeholder involvement for updating your HMIS Governance Charters and HMIS Policies and Procedures.

6. Who is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners?

7. Does the HMIS Lead conduct Privacy and Security Training and follow up on privacy and security standards?

8. What is the CoC's policy and procedures for managing a breach of Personally Identifiable Information (PII) in HMIS?

Sidebar:

- YHDP New Project Application FY2021
- Applicant Name: Interior Alaska Center for Non-Violent Living
- Applicant Number: 92-0063639
- Project Name: FY2021_YHDP_New_App_3
- Project Number: 138079
- YHDP New Project Application FY2021
- FY2019 New Detailed Instructions
- Before Starting
- Part 1 - Forms
- 1A. SF-424 Application Type
- 1B. SF-424 Legal Applicant
- 1C. SF-424 Application Details
- 1D. SF-424 Congressional District(s)
- 1E. SF-424 Compliance
- 1F. SF-424 Declaration
- 1G. HUD 2880
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- 1J. SF-LLL
- 1K. SF-424B
- Part 2 - Recipient and Subrecipient Information
- 2A. Subrecipients
- 2B. Experience
- Part 3 - Project Information
- 3A. Project Detail
- 3B. Description
- Youth Homeless Demonstration Projects
- Special YHDP Activities

e-snaps Functionality: “Add” icon and “Detail” screen for Housing Info

1. Select "Add"

Each "Detail" entry will appear in this list.

2. Complete "Detail" screen

Auto-calculates the totals based on entries on each Detail screen

Entries on each Detail screen auto-calculated on main screen

3. "Save and Back to List"

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units: 11
Total Beds: 20
Total Dedicated CH Beds: 20

Delete	View	Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
		Clustered apartments	---	11	20	20

4B. Housing Type and Location Detail

1. Housing Type: Clustered apartments

number of units and beds available for project participants at the selected housing site.

a. Units: 11
b. Beds: 20

2. Beds in "2b. Beds" are dedicated to the chronically homeless? 20

This includes both the "dedicated" and "prioritized" beds.

4. Beds for Youth: 20

5. Address:

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. Where the project uses tenant-based rental assistance in the RRH portion, or 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.

Street 1: erge
Street 2:
City: reg
State: Alabama
ZIP Code: 12345

6. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered. (for multiple selections hold CTRL key)

Available Items:
060012 Alameda
060030 Alhambra
060032 Aliso Viejo
060102 Antioch
060108 Apple Valley
060228 Bakersfield
060234 Baldwin Park
060288 Bellflower
060324 Berkeley
060450 Buena Park

Selected Items:
060078 Anaheim

Save, Save & Add Another, Save & Back to List, Back to List

4B. Housing Type and Location Detail

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

4B. Housing Type and Location Detail

1. Housing Type: None

Save Save & Add Another

Save & Back to List Back to List

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant
1C. SF-424 Application Details
1D. SF-424 Congressional District(s)
1E. SF-424 Compliance
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Part 2 - Recipient and Subrecipient Information
2A. Subrecipients
2B. Experience
Part 3 - Project Information
3A. Project Detail
3B. Description
Youth Homeless Demonstration Projects
Special YHDP Activities
Part 4 - Housing, Services, and HMIS
4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type
Part 5 - Participants
5A. Households
5B. Subpopulations
Part 6 - Budget Information

4B. Housing Type and Location Detail

1. Housing Type: Clustered apartments

2. Indicate the maximum number of units and beds available for project participants at the selected housing site.

a. Units: 11
b. Beds: 20

3. How many beds of the total beds in "b. Beds" are dedicated to the chronically homeless? 20

This includes both the "dedicated" and "prioritized" beds.

4. Beds for Youth: 20

5. Address:
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. Where the project uses tenant-based rental assistance in the RRRH portion, or 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.

Street 1: erge
Street 2:
City: reg
State: Alabama
ZIP Code: 12345

6. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered. (for multiple selections hold CTRL key)

Available Items:
080012 Alameda
080030 Alhambra
080032 Aliso Viejo
080102 Antioch
080108 Apple Valley
080228 Bakersfield
080234 Baldwin Park
080288 Bellflower
080324 Berkeley
080450 Buena Park

Selected Items:
080078 Anaheim

Save Save & Add Another

Save & Back to List Back to List

- Question 1
 - HMIS and SSO-CE = "none"
 - All housing projects: complete the questions
 - SSO non-CE = "none" or complete the questions

4B. Housing Type and Location

- Different versions of 4B
 - RRH, TH, SSO (prior screen)
 - PSH (to the right)
 - Joint TH and PH-RRH (below)

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units:
 Total Beds:
 Total Dedicated CH Beds:

[Show Filters] [Clear Filters]

Delete	View	Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
		Clustered apartments	---	11	20	20

Navigation: Back, Next

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

* List all CoC-funded and Non CoC-funded units and beds for this project

Total Units: TH RRH Total
 Total Beds: TH RRH Total

Navigation: Save & Back, Save, Save & Next, Back, Next



4B. HMIS Training

- HMIS dedicated projects complete this screen
 - * e-snaps won't flag an error if you accidentally skip this screen
- All else can leave the fields blank and proceed to Part 5

e.Forms brendakays Logout

YHDP New Project Application FY2021

Applicant Name:
Interior Alaska Center for Non-Violent Living
Applicant Number:
92-0063639
Project Name:
FY2021_VHDP_New_App_3
Project Number:
138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant
1C. SF-424 Application Details
1D. SF-424 Congressional District(s)
1E. SF-424 Compliance
1F. SF-424 Declaration
1G. HUD 2880
1H. HUD 50070
1I. Cert. Lobbying
1J. SF-LLL
1K. SF-424B
Part 2 - Recipient and Subrecipient Information
2A. Subrecipients

4B. HMIS Training

Indicate the last training date or proposed training date for each HMIS training, as applicable.

Activity	Enter date of last training or proposed next training (mm/yyyy)
Basic Computer Training	<input type="text"/>
HMIS Software Training for Sys Admin	<input type="text"/>
HMIS Software Training	<input type="text"/>
Data Quality Training	<input type="text"/>
Security Training	<input type="text"/>
Privacy/Ethics Training	<input type="text"/>
HMIS PIT Count Training	<input type="text"/>
Other (must specify)	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Save & Back Save Save & Next

Back Next



Part 5: Participant Screens

- Who the project will serve
 - New projects = prospective data
 - Maximum capacity in a single night
- Two parts
 - 5A. Households
 - 5B. Subpopulations
- Everyone must enter data because it is a *required screen
- Applies to
 - PH (PSH and RRH), TH, Joint TH and PH-RRH, SSO non-CE
- Does not apply to
 - SSO-CE, HMIS
 - Must enter a digit on each screen (e.g. 0)

Key Resources:

YHDP Round 6 New Project Application

- *Detailed Instructions*
- *Navigational Guide*



5A. Households

- 3 Household Types (composition of adults and children)
 - HH with at least 1 adult and 1 child
 - Adult HH without children
 - HH with Only children
- Characteristics (age and accompaniment)
 - Under 18, 18-24, over 24
 - Under 18 – accompanied or not

5A. Project Participants - Households			
	Households with <u>at Least One Adult and One Child</u>	Adult Households <u>without Children</u>	Households with <u>Only Children</u>
Number of Households	10		
Characteristics	Persons in Households with <u>at Least One Adult and One Child</u>	Adult Persons in Households <u>without Children</u>	Persons in Households with <u>Only Children</u>
Adults over age 24	0		
Persons ages 18-24	16		
Accompanied Children under age 18	12		
Unaccompanied Children under age 18			
Total Persons	28	0	0

5B. Subpopulations

- 3 Data tables = corresponds to each HH type
- By age categories

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

- Mutually exclusive classifications
 - CH veteran, CH non-veteran, veteran not CH, other
- Subpopulation categories
 - (e.g., physical disability, developmental disability, domestic violence)



Part 5 – Special Considerations

- Permanent Supportive Housing
 - If serving 100% chronically homeless, must ensure the number of CH individuals in Part 5 matches the number of CH beds in Part 4 (4B. Housing Type and Location)
- Host Homes
 - Only project participants should be included in the totals under 5b, even if funds are provided to support the increased costs to the household



Part 6 Budgets

- 6A. Funding Request
- Grant agreement no later than September 30, 2024.
- 2-year term
- Indirect costs
- Funding requests
- Extended Grant Term (25-30 months)
- *CoC Program interim rule: 24 CFR part 578*

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6A. Funding Request

* 1. Will it be feasible for the project to be under grant agreement by September 30, 2024?

* 2. What type of CoC funding is this project applying for under the Youth Homeless Demonstration Program?

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

* 4. Select a grant term:

5. Select the costs for which funding is requested:

- Acquisition/Rehabilitation/New Construction
- Leased Units
- Leased Structures
- Rental Assistance
- Supportive Services
- Operating
- HMIS

* 6. If conditionally awarded, is this project requesting an initial grant term greater than 124 months? (25 to 30 months)

* 6a. Select the number of months requested for the initial grant term:

Buttons: Save & Back, Save, Save & Next, Back, Next

Sidebar:

- YHDP New Project Application FY2021
- Applicant Name: Interior Alaska Center for Non-Violent Living
- Applicant Number: 92-0063639
- Project Name: FY2021_YHDP_New_App_3
- Project Number: 138079
- YHDP New Project Application FY2021
- FY2019 New Detailed Instructions
- Before Starting
- Part 1 - Forms
 - 1A. SF-424 Application Type
 - 1B. SF-424 Legal Applicant
 - 1C. SF-424 Application Details
 - 1D. SF-424 Congressional District(s)
 - 1E. SF-424 Compliance
 - 1F. SF-424 Declaration
 - 1G. HUD 2880
 - 1H. HUD 50070
 - 1I. Cert. Lobbying
 - 1J. SF-LLL
 - IK. SF-424B
- Part 2 - Recipient and Subrecipient Information
 - 2A. Subrecipients
 - 2B. Experience

<https://www.hudexchange.info/resource/2033/heart-h-coc-program-interim-rule/>



6A. Indirect Costs

- Inform HUD of intent to use a federally-negotiated indirect cost rate
- Alternative: 10% de minimis
- No budget line item

- 10% de minimis costs are NOT the same as the 10% Project Administrative costs

- Alternative: neither ICR or 10% de minimis
- Staff and overhead costs eligible when implementing activities
24 CFR 578.43 – 578.57



Project Administrative Costs

- No separate budget screen
- Only a dollar amount in the summary budget
- Eligible costs
 - Salaries, wages
 - Administrative services third-party contracts or agreements
 - Goods and services (e.g., equipment, insurance, utilities)
- Eligible activities
 - Preparing program budgets
 - Developing compliance systems and monitoring
 - Developing agreements (e.g., with subrecipients)
 - Preparing reports
 - Evaluating program results
 - Management, supervision
- *578.59 Project Administrative Costs*



e-snaps Functionality: “Add” icon and “Detail” screen for Budget Info

1. Select "Add"

The following list summarizes the funds being requested for one or more structures leased for operating the projects. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Annual Assistance Requested:	\$10,788
Grant Term:	2 Years
Total Request for Grant Term:	\$21,576
Total Structures:	1

Auto-calculates the totals based on entries on each Detail screen

Each "Detail" entry will appear in this list.

Delete	View	Structure Name	HUD Paid Rent	Total Annual Assistance Requested	Total Assistance Requested
		dgdf	\$899	\$10,788	\$21,576

2. Complete "Detail" screen

Leased Structures Budget Detail

* Structure Name: dgdf

* Street Address 1: fdgf

Street Address 2:

* City: dfg

* State: Arizona

* Zip Code: 12344

HUD Paid Rent (per Month): \$899

12 Months: 12

Total Annual Assistance Requested: \$10,788

Grant Term: 2 Years

Total Request for Grant Term: \$21,576

Click the 'Save' button to automatically calculate the Total Assistance Requested.

Buttons: Save, Save & Add Another, Save & Back to List, Back to List

3. "Save and Back to List"

Entries on each Detail screen auto-calculated on main screen

- Budget screen calculates the total for all entries on budget detail screens

Leasing and Rental Assistance: fundamental differences

	Leasing	Rental Assistance
Lease with the landlord	Recipient ----- Recipient and participant = sublease or occupancy agreement	Participant ----- Recipient and landlord = subsidy agreement / housing assistance payment contract
Rent responsibility	Recipient	Participant, per lease Recipient, per landlord agreement
Tenant contribution	Optional If charged, calculate per interim rule	PSH: Required, calculate per interim rule RRH: Variable, calculate per CoC written policies

See the HUD Exchange for examples of lease agreements

- 578.49 Leasing
- 578.51 Rental Assistance



6C. Leased Units budget

- Select FY 2023 Fair Market Rent (FMR) area
- Units, by size
- Option: HUD Paid Rent (actual rent)
- Auto-calculation
- *578.49 Leasing*

Leased Units Budget Detail

Instructions: [Show Instructions](#)

In the chart below, enter the appropriate values in the "Number of units" and "HUD Paid Rent" fields.

* Metropolitan or non-metropolitan fair market rent area:

Leased Units Annual Budget					
Size of Units	Number of units (Applicant)	FMR (Applicant)	HUD Paid Rent (Applicant)	12 months	Total request (Applicant)
SRO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
0 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
1 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
2 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
3 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
4 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
5 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
6 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
7 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
8 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
9 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
Total units and annual assistance requested:					<input type="text" value="0"/>
Grant term:					<input type="text" value="2 Years"/>
Total request for grant term:					<input type="text" value="\$0"/>

6D. Leased Structures budget

- Recipient – landlord lease is for all or portion of a building
- Budget detail screen for each structure
- HUD Paid Rent (actual rent)

Leased Structures Budget Detail

* Structure Name: ?

* Street Address 1:

Street Address 2:

* City:

* State:

* Zip Code:

...

HUD Paid Rent (per Month):	<input type="text" value="\$899"/>
12 Months:	<input type="text" value="12"/>
Total Annual Assistance Requested:	<input type="text" value="\$10,788"/>
Grant Term:	<input type="text" value="2 Years"/>
Total Request for Grant Term:	<input type="text" value="\$21,576"/>

Click the 'Save' button to automatically calculate the Total Assistance Requested.

- *578.49 Leasing*



6E. Rental Assistance budget

- Rental assistance type
- Select FY 2023 FMR area
- Units, by size
- Auto-calculation
- Units versus households
 - Short- and medium-term RA, one unit in 12 months may house 4 households
- *578.51 Rental Assistance*

Rental Assistance Budget Detail

Instructions: [Show Instructions](#)

* Type of Rental Assistance:

* Metropolitan or non-metropolitan fair market rent area:

Size of Units	# of Units (Applicant)	FMR Area (Applicant)	12 Months	Total Request (Applicant)
SRO	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
0 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
1 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
2 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
3 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
4 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
5 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
6 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
7 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
8 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
9 Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text" value="12"/>	<input type="text" value="\$0"/>
Total Units and Annual Assistance Requested	<input type="text" value="0"/>			<input type="text" value="\$0"/>
Grant Term			<input type="text" value="2 Years"/>	
Total Request for Grant Term				<input type="text" value="\$0"/>

Leasing and Rental Assistance: other considerations

- Eligible costs:*
 - Rent, security deposits
 - Leasing/rental assistance administration
 - Staff time for tenant income and rent calculations, determining rent reasonableness, inspecting units, processing payments to landlords)
- Unit configuration over the course of the grant
- Grant savings

**not an exhaustive list – see the CoC Program interim rule, 24 CFR
578.49 Leasing
578.51 Rental Assistance*



e-snaps Functionality: “Quantity and Description” and “Amount” for Budgets

- Quantity and Description
- Annual Assistance Requested

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YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant
1C. SF-424 Application Details
1D. SF-424 Congressional District(s)
1E. SF-424 Compliance
1F. SF-424 Declaration
1G. HUD 2880
1H. HUD 50070
1I. Cert. Lobbying
1J. SF-LLL
1K. SF-424B
Part 2 - Recipient and Subrecipient Information
2A. Subrecipients
2B. Experience
Part 3 - Project Information
3A. Project Detail
3B. Description
Youth Homeless
Demonstration Projects
Special YHDP Activities
Part 4 - Housing, Services, and HMIS
4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type
Part 5 - Participants

6F. Supportive Services Budget

* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs	rhrtb	\$6,777
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$6,777
Grant Term		2 Years
Total Request for Grant Term		\$13,554

Click the 'Save' button to automatically calculate totals.

Save & Back Save Save & Next
Back Next

- Budget screen calculates the total budget for all cost categories.

6F. Supportive Services budget

- Cost categories line up with 578.53 eligible costs
 - 1-16 all projects
 - 17 only for SSO projects
- 6F services costs must match 4A project services
- *578.53 Supportive Services*
- *Special YHDP Activity services (Question 2 and 3) should be budgeted here. Refer to Detailed Instructions*

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YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
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1K. SF-424B
Part 2 - Recipient and Subrecipient Information
2A. Subrecipients
2B. Experience
Part 3 - Project Information
3A. Project Detail
3B. Description
Youth Homeless Demonstration Projects
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4A. HMIS Standards
4B. HMIS Training
4B. Housing Type
Part 5 - Participants

6F. Supportive Services Budget

* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs	rhrt	\$6,777
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$6,777
Grant Term		2 Years
Total Request for Grant Term		\$13,554

Any data entered on this screen must have a corresponding entry on screen 4A Services, question #4

Click the 'Save' button to automatically calculate totals.

Save & Back Save Save & Next
Back Next

6G. Operations budget

- Cost categories line up with 578.55 eligible costs
- Eligible program costs when own, operate a structure
- Restriction: cannot combine with RA in same unit/structure
- Ineligible: participant costs
- Replacement reserves
- *578.55 Operations*

6G. Operating

Instructions: [Show Instructions](#)
* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Maintenance/Repair	<input type="text" value="tgd"/>	<input type="text" value="\$78,888"/>
2. Property Taxes and Insurance	<input type="text"/>	<input type="text"/>
3. Replacement Reserve	<input type="text"/>	<input type="text"/>
4. Building Security	<input type="text"/>	<input type="text"/>
5. Electricity, Gas, and Water	<input type="text"/>	<input type="text"/>
6. Furniture	<input type="text"/>	<input type="text"/>
7. Equipment (lease, buy)	<input type="text"/>	<input type="text"/>
Total Annual Assistance Requested		\$78,888
Grant Term		2 Years
Total Request for Grant Term		\$157,776

Click the 'Save' button to automatically calculate totals.

6H. HMIS budget

- HMIS dedicated project AND HMIS budget line item in another project type
- 5 categories based on 578.57 eligible activities

- *578.57 HMIS*

6H. HMIS Budget

Instructions: [Show Instructions](#)
* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment	<input type="text" value="rgdg"/>	<input type="text" value="\$78,888"/>
2. Software	<input type="text"/>	<input type="text"/>
3. Services	<input type="text"/>	<input type="text"/>
4. Personnel	<input type="text"/>	<input type="text"/>
5. Space & Operations	<input type="text"/>	<input type="text"/>
Total Annual Assistance Requested:		<input type="text" value="\$78,888"/>
Grant Term:		<input type="text" value="2 Years"/>
Total Request for Grant Term:		<input type="text" value="\$157,776"/>

Click the 'Save' button to automatically calculate totals.

6I. Match

- **Key to determining eligibility as match is to determine whether it would be eligible if you paid for it using program funds**
- 25% budget (calculated on total budget, except leasing)
- Application: identify match by source and type
 - 3 types: cash, in-kind goods, in-kind services
 - Does not need to correspond to a grant budget line item
- Documentation
 - Application: In-kind services documentation required (“7A In-Kind MOU Attachments” screen)
 - Grant agreement: all documentation required
- If applying for the 25% match exemption under the Special YHDP Activity Screen, you do not have to upload match; however, if the exemption is not approved, match documentation will be required prior to Grant Agreement.
- *578.73 Match*

6J. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Amount of Cash Commitments:

Total Amount of In-Kind Commitments:

Total Amount of All Commitments:

* 1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project?

The minimum required Total Match amount for the Grant Term is \$119,522. Though the project does not meet the required 25% match, the project may still be submitted.

If you are applying for the Match Exemption allowed under the YHDP Program, please demonstrate how the applicant has taken reasonable steps to maximize resources available for youth experiencing homelessness on the Special YHDP Activities screen.

If you are NOT applying for the match exemption, you MUST meet the required 25% match commitment prior to grant agreement.

[\[Show Filters\]](#) [\[Clear Filters\]](#)

Delete	View	Type	Source	Contributor	Amount of Commitments
		Cash	Government	rxrs	\$70,000

Sources of Match Detail

* 1. Type of Match Commitment:

* 2. Source:

* 3. Name of Source:
(Be as specific as possible and include the office or grant program as applicable)

* 4. Amount of Written Commitment:

6J. Summary Budget

- Budgets auto-calculate
 - 2-year grant
- Exception:
Admin entered manually
- Match auto-calculates
- Errors? – Navigate back to the Budget forms

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YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living
Applicant Number: 92-0063639
Project Name: FY2021_YHDP_New_App_3
Project Number: 138079

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

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3A. Project Detail
3B. Description
Youth Homeless Demonstration Projects
Special YHDP Activities
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4A. Services
4A. HMIS Standards
4B. HMIS Training
4B. Housing Type

6K. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$4,587
1c. New Construction			\$0
2a. Leased Units	\$58,440	2 Years	\$116,880
2b. Leased Structures	\$10,788	2 Years	\$21,576
3. Rental Assistance	\$44,208	2 Years	\$88,416
4. Supportive Services	\$8,777	2 Years	\$17,554
5. Operating	\$78,888	2 Years	\$157,776
6. HMIS	\$78,888	2 Years	\$157,776
8. Sub-total Costs Requested			\$680,545
9. Admin (Up to 10%)			\$68,054
10. Total Assistance Plus Admin Requested			\$748,600
11. Cash Match			\$70,000
12. In-Kind Match			\$0
13. Total Match			\$70,000
14. Total Budget			\$818,600

The minimum required Total Match amount for the Grant Term is \$119,522.

Click the 'Save' button to automatically calculate totals.

Save & Back Save Save & Next
Back Next

7. Attachments

- What “Required? No” means

Potential required documents:

- Subrecipient nonprofit
- Replacement reserves
- YHDP Lead and the Youth Action Board letters
- Federally approved indirect rate doc

The screenshot shows the 'e.Forms' interface for a 'YHDP New Project Application FY2021'. On the left, a sidebar contains application details: Applicant Name: Interior Alaska Center for Non-Violent Living, Applicant Number: 92-0063639, Project Name: FY2021_YHDP_New_App_3, and Project Number: 138079. The main area is titled '7A. Attachment(s)' and contains a table with columns: Delete, Document Type, Required?, Download, Document Description, and Date Attached. The table lists three attachments, all marked as 'No' under 'Required?'. Below the table are 'Back' and 'Next' buttons.

Delete	Document Type	Required?	Download	Document Description	Date Attached
	1) Subrecipient Nonprofit Documentation	No		--	No Attachment
	2) Other Attachment(s)	No		--	No Attachment
	3) Other Attachment(s)	No		--	No Attachment



7D. Certification

Authorized Representative certification

- The proposed program will comply with the various laws as outlined in the NOFO.
- The organization has an active SAM registration that is renewed annually. (System for Award Management)



Submission Summary

- Required
 - Green check mark = DONE
 - Red "X" = incomplete
- "No input required" for e-snaps, but may be required for project
 - Review Detailed Instructions
- "This e.Form has been submitted."

This e.Form has been submitted

eForms
brandelane Logout

YHDP New Project Application FY2021

Applicant Name: Interior Alaska Center for Non-Violent Living

Applicant Number: 92-005-3639

Project Name: FY2021_YHDP_New_App_3

Project Number: 138070

YHDP New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting

Part 1 - Forms

1A. SF-424 Application Type

1B. SF-424 Legal Applicant

1C. SF-424 Application Details

1D. SF-424 Congressional District(s)

1E. SF-424 Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

1I. Cert. Lobbying

1J. SF-LLL

1K. SF-424B

Part 2 - Recipient and Subrecipient Information

2A. Subrecipients

2B. Experience

Part 3 - Project Information

3A. Project Detail

3B. Description

Youth Homeless Demonstration Projects

Special YHDP Activities

Part 4 - Housing, Services, and HHS

4A. Services

4A. HHS Standards

4B. HHS Training

4B. Housing Type

Part 5 - Participants

5A. Households

5B. Subpopulations

Part 6 - Budget Information

6A. Funding Request

6B. Acq/Rehab/Const

6C. Leased Units

6D. Leased Structures

6E. Rental Assistance

6F. Supp Svcs Budget

6G. Operating

6H. HHS Budget

6I. Match

6K. Summary Budget

Part 7 - Attachment(s) & Certification

7A. Attachment(s)

7D. Certification

Part 8 - Submission Summary

8B. Summary

View Applicant Profile

Export to PDF

Get PDF Viewer

Back to Submissions List

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Complete	Page	Last Updated	Mandatory
-	1A. SF-424 Application Type	No Input Required	No
-	1B. SF-424 Legal Applicant	No Input Required	No
-	1C. SF-424 Application Details	No Input Required	No
✓	1D. SF-424 Congressional District(s)	03/27/2023	Yes
✓	1E. SF-424 Compliance	03/27/2023	Yes
✓	1F. SF-424 Declaration	03/27/2023	Yes
X	1G. HUD 2880	Please Complete	Yes
✓	1H. HUD 50070	03/27/2023	Yes
✓	1I. Cert. Lobbying	03/27/2023	Yes
✓	1J. SF-LLL	03/27/2023	Yes
✓	1K. SF-424B	03/27/2023	Yes
-	2A. Subrecipients	No Input Required	No
✓	2B. Experience	03/27/2023	Yes
✓	3A. Project Detail	03/27/2023	Yes
✓	3B. Description	03/27/2023	Yes
✓	Youth Homeless Demonstration Projects	03/27/2023	Yes
✓	Special YHDP Activities	03/28/2023	Yes
✓	4A. Services	03/27/2023	Yes
-	4A. HHS Standards	No Input Required	No
-	4B. HHS Training	No Input Required	No
X	4B. Housing Type	Please Complete	Yes
-	5A. Households	No Input Required	No
-	5B. Subpopulations	No Input Required	No
✓	6A. Funding Request	03/27/2023	Yes
✓	6B. Acq/Rehab/Const	03/27/2023	Yes
✓	6C. Leased Units	03/27/2023	Yes
✓	6D. Leased Structures	03/27/2023	Yes
✓	6E. Rental Assistance	03/27/2023	Yes
✓	6F. Supp Svcs Budget	03/27/2023	Yes
✓	6G. Operating	03/27/2023	Yes
✓	6H. HHS Budget	03/27/2023	Yes
✓	6I. Match	03/27/2023	Yes
-	6K. Summary Budget	No Input Required	No
-	7A. Attachment(s)	No Input Required	No
✓	7D. Certification	03/27/2023	Yes

Notes:

- At least one row in the Interested Parties grid must be complete.
- The total number of housing units listed on 4B. Housing Type and Location must be greater than or equal to the number of housing units included in the combined budget requests for Leased Units and Rental Assistance.
- The total number of beds listed on 4B. Housing Type and Location must be greater than or equal to the number of beds included in the combined budget requests for Leased Units and Rental Assistance.
- If total 1 also must be selected.
- 4B. Housing type list contains 1 incomplete item.

Questions?

- Follow up with your TA providers
- Submit questions to youthdemo@hud.gov
- Submit Round 6 new application technical questions to the AAQ: <https://www.hudexchange.info/program-support/my-question/>
 - Select *e-snaps* in step 2 under the Reporting Systems



Next Steps

- Watch the video
Accessing the Round 3 YHDP Project Application in e-snaps
<https://www.hudexchange.info/resource/6031/video-how-to-access-the-project-application-in-e-snaps/>
 - The video is from Round 3, but the process is still the same in e-snaps. Funding Opportunity for Round 6 is “YHDP New Project Application FY 2021”
- Use the resources
 - CoC Program interim rule
<https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>
 - YHDP Application Resources page:
https://www.hud.gov/program_offices/comm_planning/yhdp
 - e-snaps resources page: <https://www.hudexchange.info/programs/e-snaps/>

Thank you!

