# 2024 Continuum of Care Competition

# Renewal Project Threshold Criteria

*Required but not scored. If “no” for any criteria, the project is ineligible for renewal. Please complete one for each of your CoC Program funded renewing projects if you have more than one.*

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| **Project Name: Agency:** |
| **HMIS Implementation**: Projects that do not participate in HMIS are not eligible for funding unless the project is a victim services agency.  Yes  No  NA- Victims Services Agency |
| **Coordinated Entry**: Projects that have not agreed to participate in Coordinated Entry are not eligible for funding.  Yes  No |
| **Compliance with 10 Year Homeless Action Plan**: Project aligns with priorities in CoC’s 10 Year Action Plan.  Yes  No |
| **Equal Access Rule**: The project ensures equal access for program participants regardless of their race, color, national origin, religion, sex, sexual orientation, gender identity, age, familial status, or disability. The project complies with all federal and state civil rights and fair housing laws including the Fair Housing Act, Title VI of the Civil Rights Act, and the Equal Access Rule.  Yes  No |
| **Training and Technical Assistance**: All projects must agree to be responsive to training and technical assistance from the Collaborative Applicant.  Yes  No |
| **Match:** The agency has committed to match 25% of the grant except for leasing funds.  Yes  No |
| **Key Personnel Change**: All projects agree to inform the CoC Coordinator if they have changes in staffing for key senior/fiscal management or substantial changes to programs (such as participant population, admissions criteria, etc.).  Yes  No |
| **Recent Financial Statements**: Projects must provide most recent audited financial statements.  Yes  No |

Agency Authorized Representative Signature: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_ ­­­­­­­­­­­­­­­­­­­