



## **San Diego Continuum of Care Letter of Support Request**

Any organization requesting a letter of support from San Diego's Continuum of Care to support a proposal in response to a funding opportunity shall submit the following information no later than two weeks prior to the date they are requesting the signed letter of support:

- Brief summary of funding opportunity
- Project Abstract
- Draft Proposed Budget
- Responses to Questionnaire
- Draft Letter of Support

If complete information is submitted timely and responses are satisfactory, the Evaluation Committee will return a signed letter of support by the date requested via e-mail to the requesting organization.

**Project Questionnaire**

Responses to the questions below will assist the Regional Continuum of Care Council’s Evaluation Advisory Committee in understanding how the proposed project will enhance the region’s continuum of care.

1. Please describe how the proposed project will enhance San Diego’s Continuum of Care

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2. Will the proposed project use the Homeless Management Information System for data included in the funding request?

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is “no”, please describe what data source will be used for the funding request and the rationale:

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3. If funded, does the project commit to entering data timely and accurately into the Homeless Management Information System?

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is “no”, please describe what data source will be used for the funding request and the rationale:

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4. Is this a New or Renewal Project? \_\_\_\_\_ New \_\_\_\_\_ Renewal

5. If Renewal, identify outcome goal, and what was achieved over the last 12 months in the following areas:

Outcome Measure	Goal	Achieved
Percent of exits to permanent housing		
Percent of exits that had job or income growth		
Percent of people served who were chronically homeless		
<b>Other Project Specific Outcome Measures:</b>		

6. For any of the above outcomes where the differential between the goal and what was achieved exceeds 10 percentage points, please provide an explanation:

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7. What percentage of the project's beds will be included in the region's Coordinated Assessment and Housing Placement system, if available? \_\_\_\_\_

Please describe the rationale for the proposed percentage:

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8. If the project is permanent supportive housing, will beds, including turnover be prioritized for chronically homeless?

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is "no", please describe the rationale:

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9. Will the project implement Housing First Principles:

- a. Will the proposed project require people to be clean or sober

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is "yes", please explain:

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- b. Will the proposed project require people to participate in services

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is "yes", please explain:

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- c. Will the proposed project require people to have income at entry

Yes \_\_\_\_\_ No \_\_\_\_\_

If response is "yes", please explain:

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