



Imperial County Department of Social Services Imperial Valley Continuum of Care



Fiscal Year 2026 Continuum of Care Local Competition Transitional Housing- New Projects Application Template Applications due on July 24, 2026 at 5 p.m. (PDT)

This template is intended to facilitate preparation for the e-snaps application. HUD has not yet released the application in e-snaps. The official application will need to be completed in e-snaps.

The Imperial County Department of Social Services (ICDSS), acting on behalf of the Imperial Valley Continuum of Care (IVCCC), is requesting proposals from nonprofit, tribal and local government organizations and faith-based organizations. Individuals are ineligible applicants. The IVCCC is interested in receiving project applications that meet the requirements of the Domestic Violence (DV) Bonus, Continuum of Care (CoC) Bonus, and Expansion, Projects, as noted in the United States Housing and Urban Development (HUD) [FY 2026 Continuum of Care Competition and Youth Homeless Demonstration Program Grants Notice of Funding Opportunity](#) (NOFO). All project applications including applications for Renewal Projects must follow the timeline, eligibility threshold, and other requirements identified through this Local Notice of Funding Opportunity and the FY 2026 Continuum of Care Competition and Youth Homeless Demonstration Program Grants NOFO.

Applications are due on July 24, 2026, at 5:00 PM (PDT).

I. Organization Information

Organization Name	
Mailing Address	
City, State, Zip	
Executive Director Name	
Phone Number	
Email	
Type of Organization	
Organization Website	
UEI (DUNS) Number	
Employer Identification Number (EIN)	
Contact Information	
Please list below the names and contact information for staff who should receive correspondence regarding this proposal in addition to the Executive Director.	
Primary Contact Name and Title	
Phone	
Email	
Secondary Contact Name and Title	
Phone	
Email	

I. Authorization

As the authorized representative, I confirm that the information in this application is accurate to the best of our current knowledge. We will comply with all federal regulations, certifications, and assurances as included in the formal federal application (e-snaps).

Printed Name/Title	Signature	Date

II. Proposed Project Information

Name of proposed project
Project address

Proposal Request	Total Project Budget	Total Agency Budget

Is your organization a victim service provider defined in 24 CFR 578.3?	
Is your organization a faith-based organization?	
Has the project applicant ever received a federal grant, either directly from a federal agency or through a State/local agency?	
Will the project be utilizing subrecipients?	

Subrecipients			
Agency	UEI	Funding Amount	Role/Scope

Project Component Type	
Transitional Housing This template is for Transitional Housing Projects only.	☐ Yes

Application Type	
New Project This template is for new applications only.	☒ Yes

Special Project Type

New projects may apply to be considered for CoC Bonus, or Domestic Violence Bonus funds. Select all that apply.

☐ CoC Bonus	☐ Domestic Violence Bonus
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Target Populations (Select all that apply)

☐ People experiencing chronic homelessness	☐ Seniors
☐ Veterans	☐ Families with children
☐ Youth (18-24)	☐ Persons living with disabilities
☐ Persons living with mental illness	☐ Persons living with substance use disorders
☐ Fleeing domestic violence	☐ Persons living with HIV/AIDS
☐ Other: _____	☐ All populations

III. Experience of the Applicant

Describe your organization's experience in working with the proposed population and providing Transitional Housing services similar to that proposed in the allocation. Include information on why your project will fill an existing gap for the target population and demonstrate clear need for the requested funding. (Limit 2,000 characters)

Describe your organization's experience in effectively utilizing federal funds and performing the activities proposed in the application. Include: organization's experience in leveraging Federal, State, local and private sector funds; organization's financial management structure, including a functioning accounting system operated in accordance with generally accepted accounting principles or a designated fiscal agent that will maintain a GAAP-compliant accounting system in accordance with 2 CFR part 200; and any unresolved HUD monitoring or OIG audit findings for HUD grants (including ESG and HOPWA), with a detailed explanation and steps toward resolution if applicable. (Limit 2,000 characters)

IV. Project Description & Design

Transitional Housing

Describe how your proposed project will:

- provide and/or partner with other organizations to provide eligible supportive services (including case management, behavioral healthcare, employment training, etc.) necessary to assist program participants to obtain and maintain housing and achieve self-sufficiency.
- supplement with public and private resources
- ensure that at least 50 percent of participants exit to a positive destination within 24 months
- achieve at least 50 percent of participants exit with employment income as reflected in HMIS or another data system used by the applicant.
- assess participant service needs and address through individualized service plans, how participants will achieve the required level of engagement in services, activities, or employment (except those over age 62 or disabled as defined in 24 CFR 8.3 or a with a developmental disability as defined under 24 CFR 578.3)
- create service plans for each program participant detailing services to be provided, schedule of services and participant goals and strategies for achieving those goals, including target dates for achievement to focus on improved health and wellness, housing stability, and increased employment income leading to financial stability and self-sufficiency.
- have a reasonable average cost per household served

(Limit 2,800 characters)

Program Participation Requirements

The proposed project requires program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, lease, or equivalent).

Coordinated Entry

Will your project participate in the Coordinated Entry System?

V. FY 2026 Project Priorities

Review the FY 26 HUD Policy Priorities as described in the FY CoC NOFO and describe how your project is in alignment with each priority.

Priority	Applicant Response (Limit 500 characters each)
Reducing homelessness	
Increasing self-sufficiency	
Increasing employment and earned income	
Treatment and recovery	
Collaboration with Law Enforcement	
Minimizing trauma	

Certification	
The project applicant will not operate drug injection sites or "safe consumption sites". This is consistent with the objectives outlined in Section III.B of the FY 26 CoC NOFO above and is consistent with the requirements of 2 CFR 200.300(a).	
The project applicant will not engage in illegal racial discrimination. This is consistent with the requirements of 2 CFR 200.300(a).	

VI. Projection of Project Outcomes

Please provide projected outcomes that will meet HUD standards for successful project outcomes.	
Prompt	Applicant Response (Limit 500 characters each)
Describe how the project will achieve 50% exits to permanent housing to 20% of exits collectively to unsubsidized housing?	
Describe how the project will achieve 20% of participants increase employment income?	
How will the program achieve for at least 25% of people exiting the project have increased employment income?	

VII. Financials

Is your proposed project allocating funds according to an indirect cost rate? (If claiming a negotiated rate or cost allocation rate, please submit a copy of the Negotiated Indirect Cost Rate Agreement or Cost Allocation Plan)	
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Cognizant Agency	Indirect Cost Rate (%)	Direct Cost Base	Date Approved or enter N/A if using De Minimis Rate

Project Budget
Application must include the following attachments:
Applicant's summary of most recent audit, including recommendations and the accounting principles applied.
The intended use of grant funds, including a comprehensive budget. Please list all committed funding sources and any other pending awards or notifications.

Project staffing plan. For each staff position, state the staff person name or indicate vacancy, position title, tasks/responsibilities, percentage of time dedicated to this project, and required education/training/credentials/experience.

Match Funds

Documented match amount meets HUD requirements. The CoC Program requires a 25 percent match of the awarded grant amount minus funds for leasing.

If in-kind match, submit a formal memorandum of understanding (MOU)

Match Source	
Type of Commitment (Cash or In-kind)	
Type of Source (Private, Government)	
Name the Source of the Commitment (be specific and include office or grant program as applicable)	
Amount/Value of Written Commitment	