



Imperial County Department of Social Services Imperial Valley Continuum of Care



Fiscal Year 2026 Continuum of Care Local Competition Supportive Services Only- New Projects Application Template Applications are due on July 24, 2026 at 5:00 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	

II. 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

III. 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 (Select one only)	
Supportive Services Only- Stand Alone	☐ Yes
Supportive Services Only- Street Outreach	☐ Yes
Supportive Services Only- Coordinated Entry	☐ 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

IV. Experience of the Applicant

Describe your organization's experience in working with the proposed population and providing supportive 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)

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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)

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V. Project Description & Design

Supportive Services Only (SSO) Standalone

Describe how your proposed project will:

- assist participants in exiting homelessness, addressing barriers for stable housing including substance abuse disorders, unemployment and childcare needs and achieving stable housing and self-sufficiency
- plan to assess participant service needs annually
- provide supportive services to all eligible participants (including those with histories of unsheltered homelessness and those who have not traditionally engaged with services),
- coordinate with public and private resources
- have a proposed average cost per household served that is reasonable.

(Limit 2,800 characters)

Supportive Services Only (SSO) Street Outreach

Describe how your proposed project will:

- assist participants in exiting homelessness and achieving stable housing and self-sufficiency.
- assess participant service needs annually
- provide supportive services to all eligible participants (including those with histories of unsheltered homelessness who have not traditionally engaged with services)
- coordinate with public and private resources
- cooperate and partner with first responders and law enforcement
- have a proposed average cost per household served that is reasonable.

Describe if your organization has experience providing outreach services or a plan for providing outreach services consistent with the activity description at 24 CFR 578.53(e)(13)

(Limit 2,800 characters)

Supportive Services Only (SSO) Coordinated Entry

Describe how your proposed Coordinated Entry project will:

- be easily available and reachable to all persons within the CoC's region, including persons with disabilities
- strategize for advertising that ensures the advertising reaches the household experiencing homelessness with the highest needs
- ensure there is a standardized assessment process
- direct participants to the most appropriate housing and services resources.

(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?

VI. 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).	

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