


<b>Housing Navigation and Maintenance Program (HNMP) Allocation Acceptance Round 1</b>										<b>Rev.11/01/22</b>									
<b>County Allocation (select Applicant County in row 7 below):</b>								<b>\$12,193</b>											
<p>Pursuant to item 2240-103-0001 of Section 2.00 of the Budget Act of 2022 (Chapter 43 of the Statutes of 2022) and Chapter 11.8 (commencing with Section 50811) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the support of housing navigators to help young adults 18 years and up to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults currently or formerly in the foster care system.</p>																			
<b>Allocation Applicant</b>																			
<p><b>Allocation Applicant is a County</b></p> <p>Pursuant to Section 50811 of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to establish the formula allocation for the purpose of distributing these funds to counties. The formula allocation is based on each county's percentage of the total statewide number of young adults 17 through 21 years of age in the foster care and probation system. The allocation excludes Alpine and Mono counties because their calculation did not demonstrate need. The housing navigation and maintenance program for a county that accepts an allocation of money pursuant to this section shall provide training to its child welfare agency social workers and probation officers who serve nonminor dependents. The training shall address an overview of the housing resources available through the local coordinated entry system, homeless continuum of care, and county public agencies, including, but not limited to, housing navigation, permanent affordable housing, THP-Plus, and housing choice vouchers. The training shall also address how to access and receive a referral to existing housing resources, the social worker's and probation officer's role in identifying unstable housing situations for youth, and referring youth to housing assistance programs.</p>																			
<p><b>Applicant County</b>   Nevada County</p>																			
<p><b>Legal name of Applicant as stated on resolution:</b>   County of Nevada</p>																			
<p><b>Address</b>   950 Maidu Ave   <b>City</b>   Nevada City   <b>State</b>   CA   <b>Zip</b>   95959</p>																			
<p><b>Auth Rep Name</b>   Ryan Gruver   <b>Title</b>   HHSA Director   <b>Auth Rep Email</b>   Ryan.Gruver@nevadacountyca.gov   <b>Phone</b>   530-265-7226</p>																			
<p><b>Contact Name</b>   Faye Hignight   <b>Title</b>   Administrative Analyst II   <b>Email</b>   Faye.Hignight@nevadacountyca.gov   <b>Phone</b>   560-265-1728</p>																			
<p><b>Address</b>   988 McCourtney Rd   <b>City</b>   Grass Valley   <b>State</b>   CA   <b>Zip</b>   95949</p>																			
<p><b>Federal Tax ID Number (FEIN)</b>   94-6000526</p>																			
<b>Administrative Fiscal Representative</b>																			
<p><b>Legal Name</b>   Administrative Services Officer   <b>Contact Name</b>   Laurel Foster   <b>Contact Email</b>   Laurel.Foster@nevadacountyca.gov</p>																			
<p><b>Phone</b>   530-470-2420   <b>Address</b>   950 Maidu Ave   <b>City</b>   Nevada City   <b>State</b>   CA   <b>Zip</b>   95959</p>																			
<p><b>File Name:</b>   App Resolution   <b>Reference sample resolution document</b>   <b>Attached to email?</b>   No</p>																			
<p><b>File Name:</b>   App TIN   <b>Reference Taxpayer Identification Number (TIN) document</b>   <b>Attached to email?</b>   Yes</p>																			
<b>Use of Funds</b>																			
<p>The HNMP program funds housing navigators for counties. The role of a housing navigator is to act as a housing specialist to assist young adults with their pursuits of locating available housing and overcoming barriers to locating housing. Housing navigation and maintenance activities may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1) Assist young adults aged 18-24 years of age, inclusive, secure and maintain housing (with priority access given to young adults in the state's foster care system);</li> <li>2) Provide housing case management which include essential services in emergency supports to foster youth;</li> <li>3) Prevent young adults from becoming homeless; and</li> <li>4) Improve coordination of serves and linkages to key resources across the community including those from within the child welfare system and the local Continuum of Care.</li> </ol>																			
<b>Expenditure of Funds</b>																			
<p>Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 2020 West El Camino Ave. Room 300 and must reference the Contract Number.</p>																			
<b>Allocation Acceptance Requirements</b>																			
<p>In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance form, 2. GovTIN Form, and 3. Signed Resolution. <b>If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on:</b></p> <p style="text-align: center;"><b>Thursday, December 01, 2022</b></p> <p style="text-align: center;">HCD will only accept applications electronically at the following email address:</p> <p style="text-align: center;"><b>THP@hcd.ca.gov</b></p>																			
<b>Reporting Requirements</b>																			
<p>Applicant acknowledges and agrees to submit a bi-annual report to the Department for the two years following contract execution addressing the following:</p> <p>A.Number of program participants served with program funds;          B.Itemization of use of program funds;          C.Details on housing navigators and other subcontractors;          D.Number of program participants served who were in the State's foster care system;          E.Number of program participants who were homeless at time of program entry;          F.Number of program participants who exited homelessness into temporary housing;          G.Number of program participants who exited homelessness into permanent housing; and,          H.Subpopulation data including:</p> <ol style="list-style-type: none"> <li>1.Number of participants that are employed;</li> <li>2.Number of participants identified as LGBTQ+;</li> <li>3.Number of participants with a disability;</li> <li>4.Number of participants with minor children in the household; and,</li> <li>5.Average number of children per household.</li> </ol>																			
<b>Certification</b>																			
<p><b>On behalf of the entity identified in the signature block below, I certify that:</b>          The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct.          I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above.          In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.</p>																			
<table border="0" style="width: 100%;"> <tr> <td style="width: 25%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">Rachel Peña</div> </td> <td style="width: 25%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">Director of Social Services</div> </td> <td style="width: 25%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;"> </div> </td> <td style="width: 25%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11/28/22</div> </td> </tr> <tr> <td style="text-align: center;">Printed Name</td> <td style="text-align: center;">Title of Signatory</td> <td style="text-align: center;">Signature</td> <td style="text-align: center;">Date</td> </tr> </table>												<div style="border: 1px solid black; padding: 2px;">Rachel Peña</div>	<div style="border: 1px solid black; padding: 2px;">Director of Social Services</div>	<div style="border: 1px solid black; padding: 2px;"> </div>	<div style="border: 1px solid black; padding: 2px;">11/28/22</div>	Printed Name	Title of Signatory	Signature	Date
<div style="border: 1px solid black; padding: 2px;">Rachel Peña</div>	<div style="border: 1px solid black; padding: 2px;">Director of Social Services</div>	<div style="border: 1px solid black; padding: 2px;"> </div>	<div style="border: 1px solid black; padding: 2px;">11/28/22</div>																
Printed Name	Title of Signatory	Signature	Date																
<p><b>Name:</b>   Rachel Peña   <b>Phone Number:</b>   530-265-7077</p>																			
<p><b>Address:</b>   988 McCourtney Rd   <b>City:</b>   Grass Valley   <b>State:</b>   CA   <b>Zip:</b>   95959</p>																			

<b>Transitional Housing Program (THP) Allocation Acceptance Round 4</b>										Rev. 11/01/22									
<b>County Allocation (select Applicant County in row 7 below):</b>										<b>\$53,136</b>									
Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2022 (Chapter 249 of the Statutes of 2022) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the purpose of housing stability to help young adults 18 to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.																			
<b>Allocation Applicant</b>																			
Allocation Applicant is a County																			
Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults 18 through 20 years of age in foster care and homeless unaccompanied young adults (ages 18 through 24). The allocation excludes Colusa, Mariposa, Modoc, Mono, and Sierra county because their calculation did not demonstrate need.																			
Applicant County <b>Nevada County</b>																			
Legal name of Applicant as stated on resolution: <b>County of Nevada</b>																			
Address		950 Maidu Ave				City		Nevada City		State		CA		Zip		95959			
Auth Rep Name		Ryan Gruver				Title		HHSA Director		Auth Rep Email		Ryan.Gruver@nevadacountyca.gov				Phone		530-265-7226	
Contact Name		Faye Hignight				Title		Administrative Analyst II		Email		Faye.Hignight@nevadacountyca.gov				Phone		530-265-1728	
Address		988 McCourtney Rd				City		Grass Valley		State		CA		Zip		95949			
Federal Tax ID Number (FEIN)																			
Administrative Fiscal Representative																			
Legal Name		Administrative Services Officer				Contact Name		Laurel Foster				Contact Email		Laurel.Foster@nevadacountyca.gov					
Phone		530-470-2420		Address		950 Maidu Ave		City		Nevada City		State		CA		Zip		95959	
File Name:		App Resolution				Reference sample resolution document								Attached to email?		No			
File Name:		App GovTIN Form				Reference Taxpayer Identification Number (TIN) document								Attached to email?		Yes			
<b>Use of Funds</b>																			
Funds shall be used to help young adults who are 18 to 24 years of age, inclusive, secure and maintain housing with priority given to young adults formerly in the state's foster care or probation systems. Use of funds may include, but are not limited to:																			
1) Identify and assist housing services for this population in your community;																			
2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system);																			
3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and																			
4) Provide engagement in outreach and targeting to serve those with the most severe needs.																			
<b>Expenditure of Funds</b>																			
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 2020 West El Camino Ave. Room 300 and must reference the Contract Number.																			
<b>Allocation Acceptance Requirements</b>																			
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<b>Thursday, December 1, 2022</b>																			
HCD will only accept applications electronically at the following email address:																			
<a href="mailto:THP@hcd.ca.gov">THP@hcd.ca.gov</a>																			
<b>Reporting Requirements</b>																			
Applicant acknowledges and agrees to submit a bi-annual report to the Department for the two years following contract execution addressing the following:																			
A. Number of program participants served who were homeless at time of program entry;																			
B. Number of program participants served who were in the State's foster care system;																			
C. Number of program participants served who were formerly in the State's foster care or probation systems;																			
D. Number of program participants who exited homelessness into temporary housing;																			
E. Number of program participants who exited homelessness into permanent housing;																			
F. Itemization on use of program fund expenditures;																			
G. Who were the housing navigators or other subcontractor(s)?																			
H. Subpopulation data including:																			
1. Number of participants that are employed;																			
2. Number of participants identified as LGBTQ+;																			
3. Number of participants having a disability;																			
4. Number of participants with minor children in the household; and,																			
5. Average number of children per household.																			
<b>Certification</b>																			
On behalf of the entity identified in the signature block below, I certify that:																			
The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct.																			
I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above.																			
In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State																			
Rachel Peña		Director of Social Services								11/28/22									
Printed Name		Title of Signatory				Signature				Date									
Name:		Rachel Peña				Phone Number:				530-265-7077									
Address:		988 McCourtney Rd				City:		Grass Valley		State:		CA		Zip:		95949			