

SICOCN Ranking and Review

The following information is needed to determine whether the applicants project meets both HUD and the SICOC threshold requirements, and to aid in the ranking and review process for the NOFA.

Program Name: _____ Agency:___ Type of Project: _____

Population to be served: Check all that apply

- Families with children Individuals
- Unaccompanied youth only Youth 18-24 Adults 18+ Criminal History
- Chronically homeless only Domestic Violence Substance Abuse
- Mental Illness Veterans Persons with HIV/AIDS

Amount requesting for the following:

Leasing/Rental Assistance: _____

Operations: _____

Supportive Services: _____

Admin: _____

Housing and services:

_____ Number of beds:

Number of units of housing: _____

Number of beds exclusively for families with children: _____

Number of beds exclusively for singles: _____

Does the project follow a Housing First Approach: Yes No

- **If yes, please attach agency policies and procedures that address the core elements that address the Housing First approach. Please turn in the following:**

1. Most recent APR and letter from HUD approving the APR
2. Proof of quarterly drawdowns
3. Most recent financial audit
4. Documented minimum match
5. Completed "Threshold Requirements" page
6. Victim service providers must use a comparable database that complies with the federal HMIS data and technical standards or provide in-house generated answers to APR questions OR provide in-house generated answers to APR questions.
7. FIRST YEAR Renewal projects submit a copy of HUD project application and HUD documentation of date of award and date of first occupancy of project.

