



COUNTY OF SAN LUIS OBISPO  
DEPARTMENT OF SOCIAL SERVICES



2020 California Emergency Solutions and Housing  
(CESH) Application

The County of San Luis Obispo is pleased to announce the availability of funds for the California Emergency Solutions and Housing (CESH) program. The CESH program provides funding for a variety of activities to assist persons experiencing or at risk of homelessness as authorized by Senate Bill 850. The State CESH Statute can be reviewed at the following address:

[http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180SB850](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201720180SB850)

Total 2019 CESH Allocation	5% Reserve for Admin	Total Available for Application
\$412,874	\$20,643	\$392,231

CESH funds may be used for five primary activities: housing relocation and stabilization services (including rental assistance), operating subsidies for permanent housing, flexible housing subsidy funds, operating support for emergency housing interventions, and systems support for homelessness services and housing delivery systems. Refer to the 2018 and 2019 Amended Notice of Funding Availability (NOFA) for any limitations on these activities (<https://hcd.ca.gov/grants-funding/active-funding/cesh/docs/2018-&-2019-CESH-NOFAs-Amended.pdf>).

Eligible applicants include local governments, private non-profits, or for-profit organizations that the County determines is qualified to undertake one or more of the eligible activities described in the NOFA. Applicants must provide a complete, separate application for each proposed eligible activity they wish to administer. **Please submit applications by 9 a.m. on October 27<sup>th</sup> 2020.**

**I. APPLICANT INFORMATION:**

Organization Name	
Type of Organization	
DUNS Number	
Contact Person/Title	
Phone/Fax Numbers	
Email	
Address	
City, State, Zip	



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## II. AGENCY DETAILS:

Type of Agency	<input type="checkbox"/> Non-Profit	<input type="checkbox"/> For Profit	<input type="checkbox"/> Gov't/Public	<input type="checkbox"/> Other:
Date of Incorporation			Annual Operating Budget	
Number of Paid Staff			Number of Volunteers	
A) Agency Mission Statement:				
B) Please describe your agency's experience with the activities proposed in this application (400 word maximum)				



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C). Does the program participate in Coordinated Entry?

- No, the program does not participate in Coordinated Entry.
- No, the program does not participate in Coordinated Entry, but plans to participate if funded.
- Yes, the program participates in Coordinated Entry.

D). Is your agency currently participating in HMIS (or a fully compliant comparable database for Victim Service Providers)?

- Yes
- No

E). Please describe your agency's capacity to participate in HMIS, or a fully compliant database for Victim Service Providers (**Note: participation in HMIS is a requirement for receiving CESH funds**):

F). Describe how the organization and project adheres to Housing First practices, particularly low-barrier access to services:



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### III. PROJECT SUMMARY:

Name of proposed project		
Project/Program address		
Areas served	<input type="checkbox"/> City of Arroyo Grande <input type="checkbox"/> City of Pismo Beach <input type="checkbox"/> City of Morro Bay <input type="checkbox"/> City of San Luis Obispo <input type="checkbox"/> Unincorporated communities of _____	<input type="checkbox"/> City of Atascadero <input type="checkbox"/> City of Paso Robles <input type="checkbox"/> County-wide <input type="checkbox"/> City of Grover Beach

A). For which of the following eligible activities will funds be requested? (See RFP for full descriptions of each activity) **Select one activity per application.**

- (1) Rental assistance, housing relocation, and stabilization services
- (2) Operating subsidies
- (3) Flexible housing subsidy funds
- (4) Operating support for emergency housing interventions
- (5) Systems support
- (6) Develop or update a CES
- (7) Development of a plan addressing actions to be taken within a CoC service area

B). Brief Project Description:



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Total Funding Requested	\$
Total Cost to Complete Project	\$
Preferred grant term (1-5 years)	

C). Describe how the project will collaborate with other local programs, including Coordinated Entry, to increase the number of persons exiting from homelessness, decrease the length of time persons remain homeless, or to prevent homelessness:

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D). Describe how the project will meet an unmet need within the community:

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## IV. PROJECTED ACCOMPLISHMENTS:

Please provide quantified, projected accomplishments for the proposed contract period.

**NOTE:** Coordinated Entry or HMIS projects may report zero beneficiaries.

Total number of persons to benefit	
Total number of households to benefit	

Of the households listed above, how many...

are households with children (include all adults and children)	
are households without children (singles/couples without children)	
are households with only children (persons under 18 years of age)	

If selecting activity (1), (2), (3), or (4), provide the following:

Projected % of participants the program will place into permanent housing	
Projected % of participants exiting the program who will remain in permanent housing	

**Please estimate the number of unduplicated-unsheltered persons (or households) to benefit from the project.** Note: Unduplicated means the number who are served, i.e., the grant will provide services for 25 unsheltered persons for one week – not 25 persons x 7 days = 175.

(Check box if project serves households or individual persons)	Number	Households	Persons
<b>TOTAL Number of unsheltered Persons or Households:</b>		<input type="checkbox"/>	<input type="checkbox"/>
	Adults w/out children	Families	Youth
Which populations will you serve (check all that apply)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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## V. FINANCIAL INFORMATION:

If applying for multiple activities, please indicate totals below:

Activity	Amount
(1) Rental assistance, housing relocation, and stabilization services	
(2) Operating subsidies	
(3) Flexible housing subsidy funds	
(4) Operating support for emergency housing interventions	
(5) Systems support (including operations of Coordinated Entry)	
(6) Develop or update a CES	
(7) Development of a plan addressing actions to be taken within a CoC service area	
Total	

Please also attached a detailed budget, including proposed staffing for the activities and a breakdown of costs by grant year.

## VI. CONFLICTS OF INTEREST:

Please attach a copy of your organization's **Conflicts of Interests Policies**. If you do not yet have a Conflicts of Interests Policy in place for your organization, please indicate whether you will have one by October 27, 2020. Please note that if you indicate that you are working to approve a Conflicts of Interest Policy by October 27, 2020, you will be required to provide either, an electronic or hard copy of the policy to Leon Shordon at the address below, no later than October 27, 2020 or your application will be denied.

## VI. APPLICATION SUBMISSION:

Applications and accompanying documents will be due to County staff by 9:00 a.m. on October 27, 2020. Submit applications to Leon Shordon, Administrative Services Officer, Department of Social Services.

## CESH Application

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*Applicants may submit digital or hard copy applications to the locations below:*

1. Soft Copy – email to [lshordon@co.slo.ca.us](mailto:lshordon@co.slo.ca.us)  
Subject line: CESH Proposal – (Applicant Name)
2. Hard Copies – Mail or Drop-off  
Attn: Leon Shordon  
County of San Luis Obispo Department of Social Services  
3433 South Higuera Street  
San Luis Obispo, CA 93403

**Please note: The Department of Social Services office in San Luis Obispo is open to the public from 8 a.m. to 1 p.m., M-F, and applications may only be dropped off during those hours.**