

# 2023 FL-511 Request for Proposal (DCF)

2023 DCF Funding Competition for CHALLENGE, ESG, and TANF

\* Indicates required question

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Email \*

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1. Company Name \*

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2. Company Street Address \*

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3. Company City \*

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4. Company State / Province \*

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5. Zip Code \*

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6. Company Web Address

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7. Primary Contact Name \*

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8. Primary Contact Phone Number \*

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9. Primary Contact Email \*

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10. What is your primary business? \*

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11. Number of Employees \*

*Mark only one oval.*

0-10

11-25

26-50

51-100

101-200

201+

12. Length of time in business, in YEARS \*

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13. Provide your Unique Entity Identity registration in SAM.gov. All agencies must have an active registration with the System for Awards Management (SAM). You may apply for registration by visiting [www.sam.gov](http://www.sam.gov). \*

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14. Please upload your 501(c)(3) documentation \*

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15. Articles of Incorporation \*

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16. Division of Corporations registration ([sunbiz.org](http://sunbiz.org)) \*

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17. Registration with the Florida Department of Agriculture & Consumer Services: Solicitation of Contributions ([fdacs.gov](http://fdacs.gov)) \*

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18. Does your organization have an active board of directors with bylaws, regularly scheduled meetings, meeting minutes, and financial oversight? \*

*Mark only one oval.*

Yes

No

19. Please upload the board meeting minutes from the last two meeting periods. \*

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20. Does your organization have a conflict of interest policy? \*

*Mark only one oval.*

Yes

No

21. If yes, please upload your conflict of interest policy. \*

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22. Does your organization have key staff with job descriptions and/or resumes that can pass a level 2 background check and write, track, implement, and monitor the grant? \*

*Mark only one oval.*

Yes

No

23. Attach a list of key staff and job descriptions of persons who will be performing work for the grant program(s), if awarded. \*

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## **Company History**

Tell the CoC Project Review and Selection Committee about your Company History.

24. Provide a brief description of your company's history serving those nearing or experiencing homelessness \*

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25. Describe the services your company offers (max 2000 characters) \*

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26. What types of projects and contracts have you managed in the past. Please describe \*

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27. 990 forms and other financial documentation demonstrating that your institution has the cash flow capacity to support this project \*

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## **Commitment**

Please describe your organization's commitment to CoC Priorities, Strategic Approaches, and Systematic Processes and Performance Requirements.

28. Describe the practices and actions your organization will demonstrate to commit to racial equity, cultural competency, and collaboration with Opening Doors and other community partners? \*

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29. Are you willing to commit to participating in the CoC FL511 Coordinated Entry process? \*

*Mark only one oval.*

Yes

No

Maybe

30. Describe how your organization will participate in the CoC FL511 Coordinated Entry process? \*

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31. Are you willing to commit to participating in the Homeless Management Information System (HMIS) operated locally by Opening Doors, as required by these grants? Please note that all client information and service data must be entered into and kept only in HMIS, per the HMIS license agreement. \*

*Mark only one oval.*

Yes

No

Maybe

32. If no, how will your organization comply with the requirement for aggregate reporting of clients served under the State Unified Contract to be provided to Opening Doors and subsequently the state or federal funder? \*
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33. These grants require a commitment to Fair Housing and Equal Access, Housing First practices, a Low Barrier approach, and Trauma Informed Care and service delivery. Please describe your understanding of and commitment to these practices. \*
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### **Available Grants - ESG**

Please complete this section if you intend to apply for the Emergency Solutions Grant.

34. Are you applying for the ESG grant? \*

*Mark only one oval.*

Yes

No *Skip to question 45*

### **ESG Grant Proposal**

If you do not desire to apply to a specific component, please enter \$ 0.00 in the text field.

35. How much, in dollars, are you requesting for Street Outreach? \*
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36. How much, in dollars, are you requesting for Emergency Shelter? \*
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37. How much, in dollars, are you requesting for Rapid Rehousing? \*

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38. How much, in dollars, are you requesting for Homeless Prevention? \*

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39. Please upload your detailed budget proposal for ESG funding, including line items of eligible activities. \*  
You must use the ESG budget spreadsheet located at the following web address:

<https://openingdoorsnwfl.org/web/assets/download/2023-FL511-RFP-Budget-Template-ESG.xlsx>

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40. Please upload your completed match letter for ESG funding, including any letters of support. You must \*  
use the Match letter template located at the following web address:

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41. Describe the overall vision and implementation plan for the program you wish to develop with ESG \*  
funds.

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42. How will your proposal decrease chronic homelessness, reduce the length of time someone \*  
experiences homelessness, decrease returns to homelessness, and/or prevent first time  
homelessness of clients that are housed to reduce returns to unsheltered settings?

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43. What special populations are you dedicated to serving and how have you served them? Special populations include: youth up to age 24 (including pregnant youth, parenting youth, or unaccompanied youth), families with children, single adults or adult couples, chronically homeless individuals, veterans, unsheltered individuals, and others. \*

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44. What are your goals and objectives with this funding, and how will you measure your progress towards those goals? \*

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### **Available Grants - Challenge**

Please complete this section if you intend to apply for the Challenge Grant.

45. Are you applying for the Challenge grant? \*

*Mark only one oval.*

Yes

No *Skip to question 57*

### **Challenge Grant Proposal**

If you do not desire to apply to a specific component, please enter \$ 0.00 in the text field.

46. How much, in dollars, are you requesting for Housing projects? \*

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47. If your organization is completing a New Construction project, how much in dollars, are you requesting? \*

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48. How much, in dollars, are you requesting for Program projects? \*

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49. How much, in dollars, are you requesting for Service projects? \*

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50. Please upload your detailed budget proposal for Challenge funding, including line items of eligible activities. You must use the Challenge budget spreadsheet located at the following web address: <https://openingdoorsnwfl.org/web/assets/download/2023-FL511-RFP-Budget-Template-Challenge.xlsx> \*

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51. If your organization is completing a **New Construction** project, please upload your detailed budget proposal for Challenge **New Construction** funding, including line items of eligible activities. You must use the Challenge **New Construction** budget spreadsheet located at the following web address: <https://openingdoorsnwfl.org/web/assets/download/2023-FL511-RFP-Budget-Template-Challenge-NewConstruction.xlsx> \*

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52. Please upload your completed match letter for Challenge funding, including any letters of support. You must use the Match letter template located at the following web address: \*

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53. Describe the overall vision and implementation plan for the program you wish to develop with Challenge funds. \*

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54. How will your proposal decrease chronic homelessness; reduce the length of time someone experiences homelessness; decrease returns to homelessness; and/or prevent first time homelessness of clients that are housed to reduce returns to unsheltered settings? \*

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55. What special populations are you dedicated to serving and how have you served them? Special populations include: youth up to age 24 (including pregnant youth, parenting youth, or unaccompanied youth), families with children, single adults or adult couples, chronically homeless individuals, veterans, unsheltered individuals, and others. \*

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56. What are your goals and objectives with this funding, and how will you measure your progress towards those goals? \*

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### **Available Grants - TANF**

Please complete this section if you intend to apply for the TANF Homeless Prevention Grant.

57. Are you applying for the TANF grant? \*

*Mark only one oval.*

Yes

No     *Skip to question 64*

## TANF Grant Proposal

If you do not desire to apply to a specific component, please enter \$ 0.00 in the text field.

58. How much, in dollars, are you requesting for Homeless Prevention? \*

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59. Please upload your detailed budget proposal for TANF funding, including line items of eligible activities. \*  
You must use the TANF budget spreadsheet located at the following web address:

<https://openingdoorsnwfl.org/web/assets/download/2023-FL511-RFP-Budget-Template-TANF.xlsx>

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60. Describe the overall vision and implementation plan for the program you wish to develop with TANF funds. \*

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61. How will your proposal decrease recidivism (returns to homelessness or continued needs for homeless prevention)? \*

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62. What special populations are you dedicated to serving and how have you served them? Special populations include: parenting youth up to age 24, families with children, and others. \*

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63. What are your goals and objectives with this funding, and how will you measure your progress towards those goals? \*
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## Review

Please make sure all questions are answered to the best of your ability before submitting your application. Press submit when you are ready.

64. I understand that there is a required 5-minute video presentation to help evaluate my project application. \*

*Check all that apply.*

Yes

65. Please upload your 5-minute video presentation. \*

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