

FL-511 Escambia and Santa Rosa Continuum of Care

LEADERSHIP COUNCIL APPLICATION

If you are a Continuum of Care (CoC) Member in good standing and are interested in being considered for an Elected Seat on the CoC Leadership Council, please complete this application in its entirety.

The CoC Leadership Council is the CoC's governance board and a formal decision-making body responsible for overseeing and guiding its direction. It is crucial to the CoC's structure, providing leadership, strategic direction, and accountability to ensure effective coordination and delivery of services to prevent and end homelessness.

CoC Leadership Council Members are expected to contribute their expertise and resources and make decisions based on what will deliver the best outcomes, not for their organizations or sectors but for the full Continuum of Care.

Before completing this application, please review the CoC Governance Charter, including section V on the Leadership Council Qualifications and Responsibilities, Composition, Nominations, Terms, Officers, Voting Quorum and Good Standing, and Conflicts of Interest.

In addition to submitting this application, please submit the following attachments:

Note: Items 1 and 2 are required as part of your application submission to be considered for a Leadership Council seat, and item 3 is not required but strongly encouraged.

- 1. A copy of your updated resume (Required)**
- 2. A completed Code of Conduct and Conflict of Interest Disclosure (Required)**
- 3. 2 letters of support (Encouraged)** (these letters of support should speak to your character and come from those you have worked with who have recent or current lived experience of homelessness, are an existing CoC Member, or know you well and can speak to your character and commitment to homelessness solutions.

All Leadership Council Applications are due by Wednesday, January 15th, 2025, at 8 p.m. CT. The CoC's Nominating Committee will review applications, interview applicants, and develop a slate. In March, the full membership will vote to appoint and recommend the slate of recommended nominees for the Leadership Council.

CoC FL-511 Leadership Council Application

If you are a Continuum of Care (CoC) Member in good standing and are interested in being considered for an Elected Seat on the CoC Leadership Council, please complete this application in its entirety.

* Indicates required question

1. Email *

Applicant Information

2. First Name *

3. Last Name *

4. What type of CoC Membership do you hold now? *

Mark only one oval.

Individual

Organization

5. Organization Name *

6. Email Address *

7. Alternative Email Address *

8. Phone Number *

9. Which of the following counties do you live in? *

Mark only one oval.

Escambia

Santa Rosa

Other: _____

10. What counties do you represent? *

Check all that apply.

Escambia

Santa Rosa

11. Which board seat are you most interested in being considered for? *

You should select the seat for which you have the most experience and representation.

Mark only one oval.

- Person with lived experience of homelessness
- Affordable Housing Developer or Provider
- Behavioral Health Provider (must receive SAMH funding)
- Healthcare System or Provider
- Homeless Service Provider
- Law Enforcement
- Public Housing Authority
- Organizations specific to serving or representing persons with disabilities
- Organization dedicated to advancing equity in marginalized communities
- School System or Liaison
- Workforce Development
- Victim Service Provider
- Faith-based Community Representative
- Veteran Service Provider
- General Seat (open to any relevant individual or organization, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate)

12. Please list your 2nd choice of elected seat, this will help us ensure applicants are considered for more than one seat if many qualified candidates apply. *

DEMOGRAPHIC INFORMATION

The following questions are optional for you to answer. Your answers will help us ensure we have diversity and accurate representation among our CoC Leadership Council.

13. **Preferred Pronouns ***

Mark only one oval.

- He/Him
- She/Her
- They/Them
- Prefer not to answer
- Other: _____

14. **Do you have lived experience of homelessness, either currently or in the past? ***

Mark only one oval.

- Yes
- No
- Prefer not to answer

15. **Which primary race do you identify as? ***

Mark only one oval.

- White
- Black/African American/African
- Asian/Asian American
- American Indian/Alaska Native/Indigenous
- Middle Eastern/North African
- Native Hawaiian/Pacific Islander
- Multiple Races
- Prefer not to answer

16. Do you identify as Hispanic or Latina, Latino, or Latine? *

Mark only one oval.

- Yes
- No
- Prefer not to answer

17. What gender do you identify as? *

Mark only one oval.

- Woman
- Man
- Non-Binary
- Transgender
- Culturally Specific Identity (e.g., Two-Spirit)
- Questioning
- Another, different gender
- Prefer not to answer

18. Which of the following age groups do you personally represent? *

Check all that apply.

- 18-24 years of age
- 25-34 years of age
- 35-44 years of age
- 45-54 years of age
- 55-64 years of age
- 65+ years of age
- Prefer not to answer

19. **Do you identify as having a disabling condition? ***

Disabling conditions include physical disability, chronic health condition, HIV/AIDS, mental health condition, developmental disability, problematic alcohol and/or drug use, etc.

Mark only one oval.

- Yes
- No
- Prefer not to answer

AFFIRMATION OF UNDERSTANDING AND COMMITMENT

20. **I have read and understand the [CoC Governance Charter](#) and understand the role and responsibilities of the CoC Leadership Council. ***

Check all that apply.

- Yes

21. **I affirm my commitment to meeting CoC Leadership Council expectations including: ***

Check all that apply.

- Attend at least 75% of CoC Leadership Council Meetings (there will be a minimum of 6 meetings a year)
- Uphold the CoC Mission and Guiding Principles
- Uphold the CoC Code of Conduct
- Accurately present potential and perceived Conflicts of Interest
- Maintain my CoC Membership to be in good standing
- Collaborate in good faith with other members to work toward the CoC mission to address homelessness.
- Abide by the CoC Governance Charter, policies and procedures.
- Serve actively on at least one committee per year.
- Commit to serving in this role for a minimum of 2 years.
- Commit to volunteering my time of 8-15 hours per month to serve in this leadership role.

NARRATIVE

22. **Describe your interest and involvement in the issue of homelessness in Santa Rosa and Escambia Counties.** *

23. **What do you hope to accomplish through your service on the CoC Leadership Council?** *

24. **Describe some examples of how you have collaborated with other non-profits within Escambia and Santa Rosa Counties?** *

25. **Describe your experience cultivating collaboration within your personal and professional networks to constructively address complex challenges to achieve positive results.** *

26. **Describe your experience with budgeting and program sustainability.** *

27. **What ideas do you have to solve homelessness?** *

28. **If elected to the CoC Leadership Council would you prefer to serve a 2 year or 3 year term?** *

Mark only one oval.

2-year

3-year

29. **Submit your resume. ***

30. **Submit your [Code of Conduct and Conflict of Interest Form](#) . ***

31. **Upload 2 letters of support here. ***

Paper applicants must submit their application, resume, Code of Conduct & Conflict of Interest Form, and two letters of support to Serene Keiek at serenek@openingdoorsnwfl.org. Paper applicants will receive an email confirming your submission. Thank you for considering this important role in our community.

This content is neither created nor endorsed by Google.

Google Forms