



**MID-WILLAMETTE VALLEY  
HOMELESS ALLIANCE**  
MOVING TO END AND  
PREVENT HOMELESSNESS

**CONTINUUM OF CARE NOTICE OF FUNDING OPPORTUNITY**

**PROPOSAL RATING FORM**

**(3) RENEWAL PROJECTS: COORDINATED ENTRY**

| Criteria   | Corresponding Item Numbers*  | Rating 0-5                         | X Weight   | Maximum Points   |
|--|------------------------------|------------------------------------|------------|--|
| <i>Minimum Qualifications: Applicant meets minimum threshold requirements.</i>   |                              | <i>Yes/No Per Technical Review</i> | <i>N/A</i> | <i>This section will be evaluated by MWVHA consultants</i> |
| <b>SECTION 1 – RECIPIENT PERFORMANCE</b>   |                              |                                    |            |  |
| <b>1. APR TIMELINESS</b> <ul style="list-style-type: none"> <li>Did the applicant submit the previous year’s APR on time? (5 for yes, 0 for no, if no satisfactory explanation)</li> <li></li> </ul>   | Recipient Performance Screen | <i>Technical Review</i>            | 4          | 20   |
| <b>2. DRAWDOWNS</b> <ul style="list-style-type: none"> <li>Did the applicant draw funds quarterly for the current renewal project?</li> </ul>  | Recipient Performance Screen | <i>Technical Review</i>            | 4          | 20   |
| <b>3. FUNDS REMAINING</b> <ul style="list-style-type: none"> <li>Are there any funds remaining for recapture by HUD for the most recently expired grant term related to this renewal project request? (5 for no, 0 for yes, if no satisfactory explanation)</li> </ul> | Recipient Performance Screen | <i>Technical Review</i>            | 4          | 20   |
| <b>4. UNRESOLVED AUDIT FINDINGS</b>  |                              | <i>Technical Review</i>            | 4          | 20   |

| Criteria  | Corresponding Item Numbers*  | Rating 0-5 | X Weight         | Maximum Points                          |
|---|------------------------------|------------|------------------|---|
| <ul style="list-style-type: none"> <li>Are there any unresolved monitoring or OIG audit findings that are not explained to the satisfaction of the Continuum of Care?</li> </ul>  | Recipient Performance Screen |            |                  |   |
| <b>SECTION 2 - PROJECT DESCRIPTION</b>  |                              |            |                  |   |
| <b>5. PROJECT DESIGN</b>  |                              |            |                  |   |
| <ul style="list-style-type: none"> <li>Project design is fully described and includes a project plan for Coordinated Entry needs.</li> <li>Application clearly describes how CoC funding will be used.</li> <li>Applicant describes how participants will be assisted to quickly exit homelessness by obtaining or retaining housing.</li> <li>Applicant provides support services to assist people in exiting homelessness, such as transportation assistance, annual follow up, access to SSI/SSDI technical assistance through a SOAR-trained staff person.</li> </ul> |                              |            | 2<br>2<br>2<br>2 | <u>TOTAL 40</u><br>10<br>10<br>10<br>10 |
| <b>6. COORDINATION WITH OTHER ORGANIZATIONS</b>   |                              |            |                  |   |
| <ul style="list-style-type: none"> <li>Applicant describes how proposed project will collaborate with other providers or agencies in the Marion-Polk region, and how the applicant will participate with community partners through the Continuum of Care.</li> </ul>   |                              |            | 5                | 25                                      |
| <b>7. OUTCOMES AND PERFORMANCE MEASURES</b>   |                              |            |                  |   |
| <ul style="list-style-type: none"> <li>Applicant describes proposed project outcomes that are objective, measurable, trackable, and meet or exceed</li> </ul>   |                              |            | 10               | 50                                      |

| Criteria  | Corresponding Item Numbers* | Rating 0-5                      | X Weight                                       | Maximum Points  |
|---|-----------------------------|---------------------------------|--|---|
| any established HUD benchmarks for System Performance Measures. <ul style="list-style-type: none"> <li>Applicant describes relevant experience using HMIS to capture data and report program outcomes.</li> </ul>   |                             | <i>Part of Technical Review</i> |  | <i>This section will be evaluated by MWVHA consultants</i>              |
| <b>8. COORDINATED ENTRY CRITERIA</b> <p>a. To what extent does the proposed CE project cover the entire Marion-Polk geographic area?</p> <p>b. Will the CE process be affirmatively marketed and easily accessible by individuals and families seeking assistance?</p> <p>c. Is the advertisement strategy for the CE process designed to reach those with the highest barriers to accessing assistance?</p> <p>d. Does the CE process use a comprehensive, standardized assessment process?</p> <p>e. Does the CE referral process ensure program participants are directed to appropriate housing and services?</p> <p>f. If the CE process includes differences in access, entry, assessment, or referral for certain subpopulations, are those differences limited to only: (1) adults without children; (2) adults accompanied by children; (3) unaccompanied youth; (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other danger or life-threatening conditions (including human trafficking); and (5) persons at risk of homelessness?</p> <p>g. Does this CE project refer persons experiencing homelessness to projects that specifically coordinate and integrate mainstream health, social services, and employment programs to program participants for which they may be eligible?</p> |                             |                                 | 3<br><br>3<br><br>3<br><br>3<br><br>3<br><br>3 | <u>TOTAL 70</u><br>15<br><br>15<br><br>15<br><br>15<br><br>15<br><br>15 |

| Criteria   | Corresponding Item Numbers* | Rating 0-5                      | X Weight | Maximum Points   |
|--|-----------------------------|---------------------------------|----------|--|
| <b>SECTION 3 – BUDGET</b>  |                             |                                 |          |  |
| <b>9. BUDGET</b> <ul style="list-style-type: none"> <li>Budgeted costs are allowable by HUD.</li> <li>Budget is cost effective and adequate to implement and sustain project activities over the grant period.</li> <li>Budgeted costs are reasonable, given the proposed number of clients to be served.</li> <li>Budgeted costs are justified.</li> <li>Match and indirect costs (if any) are calculated correctly.</li> </ul> | Screen 6A                   | <i>Part of Technical Review</i> | 10       | 50<br><i>This section will be evaluated by MWVHA consultants</i> |
| <b>SECTION 4 – SUPPLEMENTAL EQUITY QUESTIONS</b>   |                             |                                 |          |  |
| <b>10. EQUITY</b> <ul style="list-style-type: none"> <li><b>TBD</b></li> </ul>   | Supplemental Questions      |                                 | 5        | <u>TOTAL 50</u><br>25  |
|  |                             |                                 | 5        | 25   |
| <b>TOTAL</b>   |                             |                                 | 80       | 400  |

**RATING KEY:**

5 = Excellent    4 = Very good    3 = Average    2 = Fair    1 = Poor