Continuum of Care 2017 NOFA Local Review Appeals Process

2017 CoC NOFA Local Evaluation Process and Appeals Form

Introduction

To assure the ability of the RTFH to take effective action, appeals to local scoring process decisions are limited to factors related to a violation of established process or HUD policies. Disagreement with the results of a decision that followed appropriate process will be deemed invalid. Appeals will be limited to:

- A. Verified conflicts of interest
- B. CoC Board-established voting policies
- C. Violation of locally established rules (such as procurement)
- D. Technical breach of regulations established by HUD or funding sources related to the application
- E. Technical error (such as mathematical miscalculation by the Scoring Committee. Errors in data submitted by applicant do not qualify for appeal.)

How to File an Appeal

Projects wishing to appeal scoring must submit the appeal in writing using the "2017 CoC NOFA Local Evaluation Process: Appeals Form". A signed Appeals Form and relevant evidence must be submitted to Dropbox for each project score being appealed.

To file an appeal, complete the following steps:

- 1. Upload the signed form and other documents to the 2017 Agency Folders
 - a. 1. Agency Self-Scoring Resources main folder
 - b. 1. Questions and Appeals subfolder
- 2. Title each document you upload using your agency initials as the first component of the document title.

For example, <u>all</u> documents from the Regional Task Force on the Homeless would start with "RTFH" followed by a document name (for example: RTFH Appeals Form, RTFH Timeliness Evidence)

Appeal Timeline

- Appeal Forms and supporting evidence are due to the Dropbox listed above no later than September 6, 2017 at 5:00 PM.
- Appeals submitted in any other form or to another Dropbox location may not be included in the process.
- All agencies filing an appeal must be prepared to rapidly respond to requests from the committee.

In-Person Session

If you are requesting a brief in-person meeting with the Appeals Committee, please be aware these sessions will be available on selected dates and times. Additional information will be provided by the Committee as warranted.

To request a brief in-person meeting plead Contact information to set appointment:		
Name	E-Mail	Phone:

2017 CoC NOFA Local Evaluation Process: Appeals Form Name of Agency and Project: _____ Program/Project Address: Project Classification: _____Bonus ___ New ____Renewal ____Self-reallocated For each item being appealed, please identify the application section, the question or item number, and the category of appeal (using A-E above), and attach evidence to support your claim. 1. Section and Question #, Measurement and Source/Score being appealed and why. Section: Question: _____ Category of Appeal: _____ Explanation and Source of Evidence: 2. Section and Question #, Measurement and Source/Score being appealed and why. Section: Question: _____ Category of Appeal: _____ Explanation and Source of Evidence:

3. Section and Question #, Measurement and Source/Score being appealed and why.			
Section:	Question:	Category of Appeal:	
Explanation and Source of Evidence:			
Executive Director/Other Executive Name	e (printed / typed):		
Signature:			
List of Related Attachments:			