San Diego
Continuum of Care
Letter of Support Request

Any organization requesting a letter of support from San Diego’s Continuum of Care to support a proposal in response to a funding opportunity shall submit the following information no later than two weeks prior to the date they are requesting the signed letter of support:

- Brief summary of funding opportunity
- Project Abstract
- Draft Proposed Budget
- Responses to Questionnaire
- Draft Letter of Support

This information is required regardless of funding source. If complete information is submitted timely and responses are satisfactory, the Evaluation Committee will return a signed letter of support by the date requested via e-mail to the requesting organization.
Project Questionnaire

Responses to the questions below will assist the Regional Continuum of Care Council’s Evaluation Advisory Committee in understanding how the proposed project will enhance the region’s continuum of care.

1. Please describe how the proposed project will enhance San Diego’s Continuum of Care

2. Will the proposed project use the Homeless Management Information System for data included in the funding request?
   
   Yes_______ No ________

   If response is “no”, please describe what data source will be used for the funding request and the rationale:

3. If funded, does the project commit to entering data timely and accurately into the Homeless Management Information System?
   
   Yes_______ No ________

   If response is “no”, please describe what data source will be used for the funding request and the rationale:

4. Is this a New or Renewal Project?___________New___________Renewal
5. If Renewal, identify outcome goal, and what was achieved over the last 12 months in the following areas:

<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>Goal</th>
<th>Achieved</th>
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<tbody>
<tr>
<td>Percent of exits to permanent housing</td>
<td></td>
<td></td>
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<tr>
<td>Percent of exits that had job or income growth</td>
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<td></td>
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<tr>
<td>Percent of people served who were chronically homeless</td>
<td></td>
<td></td>
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<tr>
<td>Other project specific outcome measure</td>
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<td></td>
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<tr>
<td>Other project specific outcome measure</td>
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</tbody>
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Other project specific outcome measures:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. For any of the above outcomes where the differential between the goal and what was achieved exceeds 10 percentage points, please provide an explanation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. What percentage of the project’s beds will be included in the region’s Coordinated Assessment and Housing Placement system, if available? __________

Please describe the rationale for the proposed percentage:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
8. If the project is permanent supportive housing, will beds, including turnover be prioritized for chronically homeless?

   Yes _________ No _________

   If response is “no”, please describe the rationale:
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

9. Will the project implement Housing First Principles:

   a. Will the proposed project require people to be clean or sober
      Yes _________ No _________

      If response is “yes”, please explain:
      ___________________________________________________________________
      ___________________________________________________________________
      ___________________________________________________________________

   b. Will the proposed project require people to participate in services
      Yes _________ No _________

      If response is “yes”, please explain:
      ___________________________________________________________________
      ___________________________________________________________________
      ___________________________________________________________________

   c. Will the proposed project require people to have income at entry
      Yes _________ No _________

      If response is “yes”, please explain:
      ___________________________________________________________________
      ___________________________________________________________________
      ___________________________________________________________________