

Sonoma County Continuum of Care- Homeless Coalition

c/o Sonoma County Department of Health Services, 1450 Neotomas Ave, Santa Rosa, CA 95405
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2026 Continuum of Care Competition New Project Threshold Criteria

Required but not scored. If "no" for any criteria, the project is ineligible for renewal. Please complete one for each of your CoC Program funded renewing projects if you have more than one.

Project Name:	Agency:
Eligibility: Project applicants and potential subrecipients must meet the eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility required in the application (e.g., nonprofit documentation). <input type="checkbox"/> Yes <input type="checkbox"/> No	
HMIS Implementation: Projects that do not participate in HMIS are not eligible for funding unless the project is a victim services agency. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA- Victims Services Agency	
Coordinated Entry: Projects that have not agreed to participate in Coordinated Entry are not eligible for funding. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sonoma County Homeless Coalition's 5-year Strategic Plan and HUD's Strategic Planning Goals and Homelessness Policy Priorities: The project aligns with the Homeless Coalition's priorities in CoC's Strategic Plan and HUD's Strategic Plan and priorities. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Training and Technical Assistance: All projects must agree to be responsive to training and technical assistance from the Collaborative Applicant. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Match: The agency has committed to match 25% of the grant except for leasing funds. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Financial Management and Agency Capacity: Project applicants and subrecipients must show they have the financial and management skills to carry out the project and handle federal funds. This can include describing their experience with similar projects and managing SHP, S+C, CoC Program funds, or other federal funds. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Recent Financial Statements: Projects must provide most recent audited financial statements. <input type="checkbox"/> Yes <input type="checkbox"/> No	

Agency Authorized Representative Signature: _____ Date: _____