

## Exhibit 2R: Supportive Housing Program –Renewals

This exhibit is for Supportive Housing Program (SHP) renewal projects only. It consists of instructions and items you need to respond to for your renewal project. The material has been organized as follows: (1) assembly order of all information and documents needed to apply for SHP renewal; (2) instructions on how to fill out the form; and (3) the forms to fill out. Please respond to all items and assemble your application as directed below.

Renewal Application Information Assembly Order	Where to Find
HUD-424 (For grantees only)	Application Kit, following Q and A Supplement
Project Information	See Section A, items 1-4
Supportive Services Chart	See Section B
Operating Costs Chart	See Section C
HMIS Budget (only for dedicated projects)	See Section D
<b>Required Attachments:</b>	<b>All Found in Application Kit, Following Q and A Supplement</b>
1. Applicant Certification	
2. Special Project Certification for Coordination and Integration of Mainstream Programs	
3. Discharge Planning Certification for State and Local Gov't. Applicants	
4. Consolidated Plan Certification	
5. Disclosure of Lobbying Activities	
6. Applicant/Recipient Disclosure/Update Report	
7. Acknowledgement of Applicant Receipt	

### Section A. Project Information Instructions

Items 1-3 a, b, and c - Self-explanatory.

Items 3 d and e - Attach responses from most recent APR for Questions 11 (Monthly Income at Entry and at Exit) and 16 (Overall Program Goals). If little or no progress, provide an explanation and specific plans for improvement.

Item 4 - Fill out project budget for the proposed activities in which you are requesting funds, including the cash match resources and the total project budget.

### Section B. Supportive Services Chart Instructions

Please fill out the Supportive Services Renewal Chart and add lines to the chart, as needed.

In the first column, fill in the supportive service expense. For staff positions, please include the job title and quantity (or FTE-full time equivalent); for supportive services, such as transportation, please include the type (e.g., bus tokens) and quantity. An example is provided below. In the year 1 column, enter the amount needed to pay for the service in the first year. If the grant is multi-year, enter the funds needed for Year 2, and if applicable, Year 3. In the last column, total the amount of funds needed for the full grant term.

By law, SHP funds may be used to pay for up to 80% of the total supportive services budget for each year of the grant term. This means that the grantee must make a cash payment for 20% of the project's supportive services budget annually. For Year 1 of your grant term, documentation of firm commitments of the cash resources will be required prior to grant execution. For Years 2 and 3, if applicable, a grantee needs only to certify that cash resources will also be provided. **Please note that the match requirement for Year 2 and Year 3 must be met by the end of each of those years.**

#### EXAMPLE:

Supportive Service Expense	Year 1	Year 2	Year 3	Total
<b>Service Category: Transportation</b>				
<b>Quantity:</b>	\$52,000	\$14,500	\$14,500	\$81,000
1 - 15 Passenger Van @ \$37,500				
Gasoline/Maintenance/Repair				
@ \$3,000/annual x 3 years = \$9,000				
Supportive Services Van Driver .5 FTE				
@ \$20,000/annual x 3 years = \$30,000				
Staff Fringe/Benefits .5 FTE				
@ \$3,000/annual x 3 years = \$4,500				