



SECTION I – GUIDELINES 2026-2027 UNIVERSAL APPLICATION CYCLE

The Housing and Community Development Division ("HCDD") administers the Community Development Block Grant ("CDBG"), Emergency Solutions Grants ("ESG"), and Housing Opportunities for Persons with AIDS ("HOPWA") grant programs awarded annually to the City of Jacksonville ("the City") through the U.S. Department of Housing and Urban Development ("HUD").

Program funds are sub-granted annually to public agencies and private non-profit organizations that are responsible for developing and implementing programs that primarily benefit low and moderate-income citizens or aid in the prevention and elimination of slum and blight. Awards are made to projects that best meet program eligibility requirements and address prioritized needs according to the City's most recent Consolidated Plan.

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All applicant organizations are required to attend one of two Technical Assistance & Budget workshops to be eligible to apply for funding. **The Technical Assistance & Budget Workshop must be attended by the agency's financial staff responsible for managing the grant.** During the workshops, HCDD staff will review the grant application process, project eligibility, and provide information to assist with application preparation. Applications will not be accepted from agencies that have not attended at least one of the two Technical Assistance & Budget Workshops.



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2026-2027 Universal Application Cycle Technical Assistance & Budget Workshop Dates:

- Tuesday, December 2, 2025, at 2:00PM at the Jacksonville Main Library, Conference Center - Auditorium, 303 N. Laura Street, Jacksonville, FL 32202
- Wednesday, December 3, 2025, at 10:00AM at the Jacksonville Main Library, Conference Center - Auditorium, 303 N. Laura Street, Jacksonville, FL 32202

If after attending a workshop applicants need additional assistance, questions must be emailed to HCDDComments@coj.net.

A. FUNDING GUIDELINES

- **Agency Status:** Applicant organization must be a public agency or private non-profit organization at the time the application is submitted.
- **Agency Standing:** Applicant organization must maintain good standing with the State of Florida and the City.
- **Funding Availability:** Proposed projects will only be eligible for funding beginning October 1, 2026, **pending City Council approval.**
- **Minimum Funding Request:** The minimum funding amount is **\$25,000 (unless microgrant request).**
- **Maximum Funding:** The maximum funding amount that may be granted is **\$75,000.**
- **Microgrant Request:** Up to **five grants of \$10,000 each** will be available for first-time recipients.
- **Contract Requirement:** Applicants will be required to execute a contract with the City before receiving any approved funds. Funds will not be obligated until the contract is accepted and signed by all parties.
- **Funding Disbursement:** Funding is disbursed on a reimbursement basis. **If the applicant organization does not have the capacity to work on a reimbursement basis, the applicant organization is ineligible to proceed.**
- **Other Funding Sources:** Applicants must demonstrate they have attempted to obtain funding from other sources. Evidence of this (an award letter, statement, or other documentation) must be submitted with the proposal, with response from potential funding sources.
- **Project Beneficiaries:** To be considered for funding, a project must primarily benefit low- and moderate-income persons or special needs populations as defined by HUD programmatic regulations.



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- **Funding Limitations:** Funds will not be granted to reduce existing deficits, entertainment, lobbying expenses, audits, or other ineligible expenses under the Universal Application Guidelines.
- **Insurance:** All applicants approved for funding must provide the City with Certificates of Insurance in a form acceptable to the City for all required insurance.
- **Internal Controls:** Applicants must demonstrate adequate management and fiscal controls within their current organization to undertake the proposed project.
- **Match/Leverage Funds:** Applicants must demonstrate the ability to leverage or match the requested funds from other sources. All leveraged and matching funds must be dedicated and documented to the requested project and available upon the start of the program year October 1, 2026. The following leverage/match requirements apply:
 - ESG Projects ONLY: Minimum 100% MATCHING FUNDS required.
- **Status of Funds:** Applicants must report the status of all funds that are requested or proposed from other sources.

B. APPLICATION CRITERIA

- **Project Goals:** Project goals must be attainable within a defined period of time (typically one year) and should achieve measurable results.
- **HUD Requirements:** Projects must meet all applicable grant requirements of HUD.
- **Conflict of Interest:** Applicants must submit a Conflict-of-Interest disclosure form (page 22 of this document) for all board members, commission members, executive management, officers, and program staff associated with the delivery of program.
- **Priority Needs:** Applications must address one or more of the following priority needs set forth in the 2021-2025 Consolidated Plan:
 - Affordable Housing Preservation and Development
 - Expansion of Available Public Services
 - Addressing Homelessness
 - Planning and Disaster Preparedness
- **Environmental Review Record:** Consideration should be taken in the selection of projects and in the preparation of applications to ensure that environmental and historic preservation impediments do not cause an application to be denied, or approval significantly delayed. Applicants should canvas the service area and note any environmental concerns and address how their program will mitigate them.



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- **Violence Against Women Act (“VAWA”) Reauthorization Act of 2022** went into effect October 1, 2022. The Act includes new requirements on housing protections, right to report, and compliance that apply to CDBG recipients. All local governments that receive CDBG funds from Jacksonville must comply with the Right to Report. Homeowners, landlords, and tenants have the right to seek emergency assistance and shall not be penalized for seeking emergency assistance such as fines, eviction, or designation of the property as a nuisance. Reporting Requirements for Laws Relating to the Right to Report. Any municipal, county, or state government that receives CDBG funding must comply, including subgrantees. CDBG recipients will be required to report on laws and ordinances that they or their subgrantees have adopted that violate this right.
- **HOPWA Rent Standard:** 24 CFR 574.320(a)(2) requires HOPWA grantees to establish rent standards for their rental assistance programs. All HOPWA grantees that utilize funding to provide rental assistance must establish a rent standard that sets the maximum subsidy amount for each unit size, efficiency to six-bedroom, that receives HOPWA rental assistance. When establishing the Rent Standard, grantees should strive for a balance between the efficient use of HOPWA rental assistance dollars and increasing the affordable housing options available to low-income people living with HIV and their families. The grantee must document the Rent Standard in program policies and procedures and have available for review the method used to establish the Rent Standard.

C. SUBMISSION INSTRUCTIONS

- **Applications must be received by HCDD no later than 5:00 p.m. EST on Thursday, January 8, 2026.** No late applications will be accepted.
 - Applications submitted between December 3, 2025 and January 8, 2026 will be accepted in-person at the Housing and Community Development Division:

Housing and Community Development Division
214 N. Hogan Street, 7th Floor
25-26 Universal Application Cycle
Jacksonville, Florida 32202
9:00 a.m. – 5:00 p.m.

- Applicants must submit a separate and complete application for each project type for which funding is requested.



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- Applicants must submit one (1) original signed paper copy of the entire application by hand delivery and one (1) electronic copy of the entire application on a USB thumb drive by hand delivery. The application submission must meet the following requirements:
 - Paper Copy:
 - Must be submitted in a three-ring binder/notebook.
 - Must use divider tabs, labeled as described on the Application Checklist included in this application on page 19, to divide each section of the application response and each application attachment.
 - Original signatures are required for all application documents. Electronic signatures are acceptable on the Conflict-of-Interest forms.
 - Electronic Copy:
 - Must be submitted on a USB thumb drive.
 - Each application attachment must be saved as a separate file on the USB thumb drive and labeled as described on the Application Checklist included in this application on page 18. See Figure 1 below for an example of labeling instructions:
























Name	Date modified	Type	Size
 1_Application.pdf	11/14/2022 12:32 PM	Adobe Acrobat D...	17 KB
 2_Budget Form.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 3_Financial Statement.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 4_Other Funding Sources.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 5_Audit.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 6_Authorization Resolution.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 7_Resolution for Signature Authority.pdf	11/14/2022 12:33 PM	Adobe Acrobat D...	17 KB
 8_Board of Directors.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 9_Conflict of Interest.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 10_Program Staff.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 11_Organization Chart.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 12_Job Descriptions.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 13_Resumes.pdf	11/14/2022 12:34 PM	Adobe Acrobat D...	17 KB
 14_Confidentiality Procedures.pdf	11/14/2022 12:35 PM	Adobe Acrobat D...	17 KB
 15_Selection Procedures.pdf	11/14/2022 12:35 PM	Adobe Acrobat D...	17 KB
 16_Articles of Incorporation.pdf	11/14/2022 12:35 PM	Adobe Acrobat D...	17 KB
 17_Organization Bylaws.pdf	11/14/2022 12:35 PM	Adobe Acrobat D...	17 KB
 18_Certificate of Nonprofit Status.pdf	11/14/2022 12:35 PM	Adobe Acrobat D...	17 KB
 19_Letter of Endorsement.pdf	11/14/2022 12:36 PM	Adobe Acrobat D...	17 KB
 20_Sunbiz Agency Report.pdf	11/14/2022 12:36 PM	Adobe Acrobat D...	17 KB
 21_UEl.pdf	11/14/2022 12:36 PM	Adobe Acrobat D...	17 KB
 22_Liability Coverage.pdf	11/14/2022 12:36 PM	Adobe Acrobat D...	17 KB
 23_Workshop Certificate.pdf	11/14/2022 12:36 PM	Adobe Acrobat D...	17 KB

Figure 1 – Example of USB Labeling Instructions



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D. REVIEW PROCESS

It is the responsibility of the City to ensure that funds are disbursed and managed in accordance with funding regulations. To fulfill this responsibility, the City will conduct a review of all applicants applying for funding to evaluate their operations, services, projects, and budgets.

- The following must be met, or the application will not be reviewed for funding:
 - Application is complete, approved, and submitted by the Board of Directors or designated representative.
 - Proposed service, project, or project meets one of the HUD National Objectives.
 - Completed 2026-2027 Budget Form.
- Applications must receive a **minimum score of 75** to be eligible for further review. Receipt of minimum score is not a guarantee of funding.
- All applicants will be notified of the funding recommendations in writing, on or about August 2026. Receipt of an award letter is not a guarantee of funding.
- Receipt of prior year funding awards does not guarantee continued or future funding.
- Agencies who have received prior funding through the City will also be evaluated on past performance in carrying out programmatic activities and contractual compliance. Factors to be considered from the applicant's risk assessment include, but not limited to the following:
 - Agency ability to meet service delivery goals
 - Timely expenditure of funds
 - Timely reporting
 - Accuracy of reporting
 - Ability to meet audit requirements
 - Other programmatic and fiscal contractual requirements
- Final approval by the Mayor's Budget Review Committee and City Council is required.
- All awards are subject to further pre-contract negotiation, an award of the annual entitlement appropriation by HUD to the City, and an Environmental Review.
- The City, in its sole and absolute discretion, with or without cause, and without liability of any kind to any applicant, reserves the right to accept or reject any and all applications either in whole or in part, waive any informalities or irregularities of any applications, cancel this Universal Funding Application at any time, and take any action in the best interest of the City. The City's decision in all matters shall be final. The City reserves the right to contact an applicant if additional information is required.



**SECTION II - APPLICATION
2026-2027 UNIVERSAL APPLICATION CYCLE**

A. AGENCY INFORMATION

Fed. I.D. # _____

Unique Entity Identifier (SAM): _____

Organization or Agency Legal Name: _____

Fiscal Year: (Start Date) _____

Agency Street Address: _____

City: _____ State: _____ Zip Code: _____

Council District: _____

Location of proposed service/program/project (if different than stated above):

Street Address: _____

City: _____ State: _____ Zip Code: _____

Council District(s) if different than stated above: _____

Applicant's Legal Name: _____

Primary Contact: _____ **Title:** _____

Telephone No: _____ E-mail: _____

President/Executive Director: _____

Telephone No: _____ E-mail: _____



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B. PROJECT DESCRIPTION (QUESTIONS 1-9)

1. Project Description - All Applicants: Provide a detailed description of your proposed project. This should include a summary of the project and the objectives that the agency/organization will accomplish during the fiscal year. *Type your response in the text box below. 300 maximum word count.*

2. Project Description: Service Delivery – CDBG Applicants ONLY: Select one service delivery area:

- ☐ Public Services (select one primary beneficiary below):
- ☐ homeless; must also meet ESG homeless service requirements
 - ☐ victims of abuse
 - ☐ special needs population (elderly, disabled adults, illiterate adults)
 - ☐ low-to-moderate income



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3. Project Description - Service Delivery - CDBG Applicants ONLY: Select the box below that best describes the project:

- ☐ This project is a new service not already available in the community.
- ☐ This project is a new service for this organization, but the service is already available in the community by another organization.
- ☐ This project is expanding an existing service. Evidence of expansion of existing service must be documented through the program year.

4. Project Description - Service Delivery - HOPWA Applicants ONLY: Select the primary service that this project will provide for:

- ☐ Permanent Housing Placement
- ☐ Short-Term Rent, Mortgage, Utilities ("STRMU")
- ☐ Supportive Services. Evidence of supportive services is mandatory and must be documented through the program year.
- ☐ Tenant-Based Rental Assistance (TBRA)

5. Project Description - Service Delivery - ESG Applicants ONLY: Select the primary service that this project will provide for:

- ☐ Emergency Shelter
- ☐ Street Outreach
- ☐ Services Only
- ☐ Day Shelter
- ☐ Homelessness Prevention
- ☐ Rapid Rehousing
- ☐ Domestic Violence

6. Project Description - Service Delivery – CDBG/HOPWA Applicants selecting Homeless Public Service Delivery and ESG Applicants ONLY: This organization currently uses HMIS.

- ☐ Yes ☐ No

7. Project Description - Service Delivery - CDBG Applicants selecting Homeless Public Service Delivery and ESG Applicants ONLY: This organization participates in the Continuum of Care Coordinated Entry Process.

- ☐ Yes ☐ No



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8. Project Description - Service Delivery - CDBG Applicants selecting Homeless Public Service Delivery and ESG Applicants ONLY: This organization has adopted a Housing First policy.

☐

Yes

☐

No

9. Project Description - Service Delivery - CDBG Applicants selecting Homeless Public Service Delivery and ESG Applicants ONLY: Does your application include a project specific endorsement from the Continuum of Care Governing Council? If so, you must include a copy of the endorsement with the application.

☐

Yes

☐

No

C. AGENCY SUMMARY (QUESTIONS 10-25)

10. Agency Summary – Program Services - All Applicants: Summarize the professional expertise of project-relevant staff members responsible for implementation of this project in their ability to manage or provide program services. If the staff member does not have prior experience in providing the proposed service, please indicate experience and successes carrying out similar programs. Remember to attach all project-relevant staff resumes to this application. Resumes must include current position at agency applying for this project.

Type your response in the text box below. 300 maximum word count.



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11. Agency Summary - Program Services - All Applicants: Select the response that best describes the project-relevant staff members' experience with program management of grant programs.

- ☐ Multiple staff members associated directly with the project have relevant program management experience, reflected on their resumes attached to this application.
- ☐ No other staff members, besides the manager, associated directly with the project have relevant program management experience.

12. Agency Summary – Program Services – All Applicants: Select the response that best describes the project-relevant manager's years of experience managing programs and services. This will reflect on the project manager's resume attached to this application.

- ☐ 5+ years experience in relevant program management
- ☐ 3-5 years experience in relevant program management
- ☐ 1-3 years experience in relevant program management
- ☐ 0-11 months experience in relevant program management

13. Agency Summary – Program Services – All Applicants: Pursuant to Chapter 435, F.S., does this agency conduct a Level 2 State and National background check for employees?

- ☐ Yes ☐ No

14. Agency Summary – Program Services – All Applicants: Does this agency have client confidentiality procedures to ensure confidentiality of client files? These procedures must be included in application submission as per the attached checklist.

- ☐ Yes ☐ No

15. Agency Summary – Program Services - All Applicants: The overall number of staff dedicated to implementation of this project: _____

16. Agency Summary – Program Services - All Applicants: The number of staff dedicated to implementation of this project who have experience with City of Jacksonville grant programs: _____

17. Agency Summary – Program Services - All Applicants: The number of staff dedicated to implementation of this project who have experience with non-City of Jacksonville grant programs: _____

18. Agency Summary - All Applicants: The number of staff dedicated to implementation of this project with no grant experience: _____



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19. Agency Summary – All Applicants: Provide a detailed project management plan including elements such as project deliverables, performance and monitoring, and anticipated timeline.

Type your response in the text box below. 400 maximum word count.



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20. Agency Summary – Financial Management - All Applicants: Identify and describe grant administration software and financial management capabilities, and financial grant management policies and procedures the organization possesses to manage this project consistent with Federal financial management requirements as set forth in 2 CFR 200.

Type your response in the text box below. 300 maximum word count.

21. Agency Summary - Financial Management – All Applicants: Describe grant management experience of key staff responsible for financial management of the project.

Type your response in the text box below. 300 maximum word count.



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22. Agency Summary – Financial Management - All Applicants: Select the response that best describes the organization's financial grant management:

- ☐ 3 + years previous experience with City of Jacksonville grant programs.
- ☐ 1-2 years previous experience with City of Jacksonville grant programs.
- ☐ Previous experience with similar grant programs outside of City of Jacksonville.

23. Agency Summary – Financial Management – All Applicants: Describe internal controls and separation of duties the organization has currently in place to properly manage public funds.

Type your response in the text box below. 300 maximum word count.

24. Agency Summary – Financial Management– All Applicants: This agency/organization has a dedicated Chief Financial or equivalent financial officer. ☐ Yes ☐ No

25. Agency Summary – Financial Management– All Applicants: How does your agency determine indirect costs? Please select one.

- ☐ Simplified Allocation Method
- ☐ De Minimis Rate (15% of Modified Total Direct Costs)
- ☐ Negotiated Cost Rate (must be approved no later than application deadline)



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D. STATEMENT OF NEED (QUESTIONS 26-31)

26. Statement of Need – Narrative Response - All Applicants - Describe the project's target population and service delivery area. Support the urgency of meeting this need using current data.

Type your response in the text box below. 300 maximum word count.

27. Statement of Need - Narrative Response – All Applicants: Describe the community problem or need that this project is designed to address. *Type your response in the text box below. 300 maximum word count.*



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28. Statement of Need - CDBG Applicants ONLY: Select one population that best describes the project's primary target population:

- ☐ Homeless
- ☐ Victims of domestic violence or victims of abuse
- ☐ Elderly, disabled, or illiterate adults
- ☐ Low-to-Moderate Income population, including PHA residents

29. Statement of Need - ESG Applicants ONLY: Select one population that best describes the project's primary target population:

- ☐ The target population of this project are victims of domestic violence.
- ☐ The target population of this project are youth.
- ☐ The target population of this project are veterans.
- ☐ This project provides a mental health or substance abuse service.
- ☐ This project provides other target population or service.

30. HOPWA Applicants ONLY: Select one that best describes the project's primary target population's housing situation within the last 3 months:

- ☐ Homeless
- ☐ Transitioning from a substance/mental health facility
- ☐ Transitioning from a hospital or residential care facility

31. All Applicants – Describe how use of your match and leverage funds, if any, will improve implementation of your project. *Type your response in the text box below. 300 maximum word count.*

E. COMPLIANCE

Please note that if any of the following issues are found your project will not be funded:

- Unresolved Compliance Findings as of January 1, 2026.
- Unresolved Davis-Bacon or Section 3 Notice of Discrepancies as of January 1, 2026.
- Unresolved Monitoring Findings as of January 1, 2026.

F. CERTIFYING REPRESENTATIVE

A Resolution of the Board of Directors authorizing the submission of the 2026-2027 Universal Cycle Application is required. A Resolution of the Board of Directors authorizing the party or parties which shall have executory authority for any grant contracts awarded is also required with this application. Both of these requirements may be met in a single Resolution of the Board of Directors specifically listing both requirements.

G. REPRESENTATIONS AND WARRANTIES OF RECIPIENT

- (i) The Applicant is not in breach of any prior donation agreement or City Ordinance Code provisions by which the City donated property to the Applicant for the development of affordable housing; and
- (ii) The Applicant is not on the Council Auditor's noncompliance list pursuant to Chapter 118, or the Vendor Debarment List pursuant to Chapter 126, Ordinance Code; and
- (iii) The Applicant is not in breach of any of the conditions or requirements of a City grant award or program; and
- (iv) The Applicant is not delinquent on taxes or payment of liens, including code enforcement, nuisance liens, demolition liens, or other municipal liens or fines, on real property owned by the Applicant and incurred after the Applicant took ownership of the real property; and
- (v) The Applicant is not in litigation against the City other than as an agent, attorney, guardian, or personal representative of an estate.

To the best of my knowledge and belief, information in this proposal is true and correct and the governing body of the Applicant has duly authorized the document.

NAME:	
<i>(Please Type)</i>	<i>(Signature)</i>
TITLE:	DATE SIGNED:



SECTION III - APPENDIX

REQUIRED DOCUMENT CHECKLIST AND LABELING PROCEDURES

✓	Required Document	Divider Tabs Labeled in Binder As:	Document Labeled on USB Thumb Drive As:
	Completed Application (Section II, pages 7-17).	Application	1_ Application
	Completed Budget Form (page 19 of this document)	Budget Form	2_ Budget Form
	Year-to-Date Financial Statement	Financial Statement	3_ Financial Statement
	Letters of commitment and/or awards from other funding sources for this project	Other Funding Sources	4_ Other Funding Sources
	Most recent Certified Audit, Management Letter, and Agency Response	Audit	5_ Audit
	Resolution from the Board of Directors authorizing the application for and use of funds from the City of Jacksonville (sample page 20). Wet signature required.	Authorization Resolution	6_ Authorization Resolution
	Corporate Resolution from the Board of Directors authorizing an individual the authority to sign the application (sample page 21). Wet signature required.	Signature Resolution	7_ Resolution for Signature Authority
	List of Current Board Members	Board of Directors	8_ Board of Directors
	Conflict of Interest Disclosure Forms for all Board Members/Commission Members, Executive Management/Officers, and Program Staff associated with Delivery of Program (page 22 of this document).	Conflict of Interest	9_ Conflict of Interest
	List of all current or proposed staff names and titles directly associated with proposed grant/program.	Program Staff	10_ Program Staff
	Organization Chart with employee names and titles .	Organization Chart	11_ Organization Chart
	Job descriptions with pay scales for Executive Director, Fiscal Officer, Program Administrator, and Program Staff and any other proposed positions to be funded.	Job Descriptions	12_ Job Descriptions
	Resumes of Executive Director, Fiscal Officer, Program Administrator, Program Staff, copies of certifications, and consultant contract (if applicable).	Resumes	13_ Resumes
	Client confidentiality procedures to ensure confidentiality of client files.	Confidentiality	14_ Confidentiality Procedures
	Procedures for selecting contractors and consultants, and agency purchasing policies.	Selection Procedures	15_ Selection Procedures
	Articles of Incorporation	Articles of Incorporation	16_ Articles of Incorporation
	Most recent Organization By-Laws	Organization By-Laws	17_ Organization Bylaws
	Certificate of Non-profit Status	Certificate of Non-Profit Status	18_ Certificate of NonProfit Status
	Letter of Endorsement from the Northeast Florida Continuum of Care (ESG applicants only)	Letter of Endorsement	19_ Letter of Endorsement
	Copy of Sunbiz Agency Report (Submit the page showing Officers and Active Status, etc.)	Sunbiz Agency Report	20_ Sunbiz Agency Report
	Unique Entity Identifier (SAM.gov Registration Confirmation)	UEI	21_ UEI
	Proof of General Liability Coverage	Liability Coverage	22_ Liability Coverage
	Technical Assistance and Budget Workshop Attendance Certificate	Workshop Certificate	23_ Workshop Certificate

UNIVERSAL FUNDING APPLICATION FISCAL YEAR 2026 - 2027 BUDGET FORM

THIS PAGE IS FOR REFERENCE ONLY. The Budget Form is a separate Excel document which must be completed and submitted as part of the application. After applicants complete the areas shaded in blue, the form will auto-calculate areas shaded in gray. The Excel file is required in the same format as all other attachments (one hard copy and one electronic file on USB drive).

The FY 2026-2027 Budget Excel document can be accessed online at <https://www.jacksonville.gov/hcdd> under the 2026-2027 Federal Grant Application section.

SOURCES OF FUNDS		PROPOSED BUDGET	<div style="font-size: 2em; font-weight: bold;">SAMPLE</div>			
A. Funds Requested		\$ -				
B. Sources of Matching Funds						
Match Funds	\$ -					
Leverage Funds	\$ -					
Donations/ In Kind	\$ -		Agency Name Project Name Project Type Microgrant Request: YES NO <i>Microgrant request may not exceed \$10,000</i> Does Budget = Total Sources of Funds Yes			
Total Sources of Funds		\$ -				
This table is automatically filled based on calculations in Columns A and B in the works						

ITEM #	DESCRIPTION OF WORK	TOTAL PROJECT COST	A FUNDS REQUESTED	B SOURCES OF MATCHING FUNDS		
				Match Funds	Leverage Funds	Donations/ In Kind
				1	2	3
DIRECT COSTS		\$ -				
1		\$ -	\$ -	\$ -	\$ -	\$ -
2		\$ -	\$ -	\$ -	\$ -	\$ -
3		\$ -	\$ -	\$ -	\$ -	\$ -
4		\$ -	\$ -	\$ -	\$ -	\$ -
5		\$ -	\$ -	\$ -	\$ -	\$ -
6		\$ -	\$ -	\$ -	\$ -	\$ -
7		\$ -	\$ -	\$ -	\$ -	\$ -
8		\$ -	\$ -	\$ -	\$ -	\$ -
9		\$ -	\$ -	\$ -	\$ -	\$ -
10		\$ -	\$ -	\$ -	\$ -	\$ -
11		\$ -	\$ -	\$ -	\$ -	\$ -
12		\$ -	\$ -	\$ -	\$ -	\$ -
13		\$ -	\$ -	\$ -	\$ -	\$ -
14		\$ -	\$ -	\$ -	\$ -	\$ -
15		\$ -	\$ -	\$ -	\$ -	\$ -
INDIRECT COSTS		\$ -				
1		\$ -	\$ -	\$ -	\$ -	\$ -
2		\$ -	\$ -	\$ -	\$ -	\$ -
3		\$ -	\$ -	\$ -	\$ -	\$ -
4		\$ -	\$ -	\$ -	\$ -	\$ -
5		\$ -	\$ -	\$ -	\$ -	\$ -
Total Project Cost		\$ -	\$ -	\$ -	\$ -	\$ -

FORM OF RESOLUTION

At a meeting held on the following date _____, the Executive Committee/Board of Directors of the following agency: _____ passed the following resolution:

The Board of Directors authorizes the application for and use of funds from the City of Jacksonville's Neighborhood's Department, Housing and Community Development Division for activities described in the proposal and, if awarded funds, shall implement the activities in a manner to ensure compliance with all applicable federal and local laws and regulations.

Signature of Board President

Date

Printed Name of Board President

Telephone Number

Form of Corporate Resolution

CORPORATE RESOLUTION CERTIFICATION

The undersigned Secretary of _____, a Florida non-profit corporation (“Corporation”), does hereby certify that the following Resolution was adopted by the corporation at a meeting of the Board of Directors of the Corporation held on _____, 20____.

RESOLVED that _____, the _____ of the Corporation is hereby authorized and empowered to execute on behalf of the Corporation any and all documents, contracts and/or grant agreements between the City of Jacksonville and the Corporation (“Authority”).

FURTHER RESOLVED that in addition and without limiting the foregoing, that the Authority of the Corporation be, and hereby is, authorized to take or cause to be taken, such further action, and to execute and deliver or cause to be delivered, for in the name and on behalf of the Corporation, all such instruments and documents as the Authority may deem appropriate in order effectuate any documents or instruments executed in accomplishment of any action or actions authorized as stated herein shall be deemed to be conclusive approval thereof by this Corporation and the binding act and obligation of this Corporation.

DATED: _____

Printed Name: _____

CONFLICT OF INTEREST DISCLOSURE FORM

Federal Law prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the funding sources administered through this jurisdiction ⁽¹⁾ or who are in the position to participate in a decision making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity, either for themselves or those whom they have family or business ties, during their tenure or for one year thereafter. **Please note that as of October 1, 2024 this includes holding a position as a board member of a non-profit agency applying for funding through the City of Jacksonville.**

Therefore, please answer the following disclosure questions:

1. Are you currently a (Please Check One):

☐

Board Member

☐

Commission Member

☐

Officer

☐

Executive Management Staff

☐

Staff directly associated with delivery of program

2. State position held: _____

3. Are you a business partner of any City of Jacksonville employee(s), member of City Council or member of the Jacksonville Housing and Community Development Commission (JHCDC)?

(Please Check One): No

☐

Yes

☐

If yes, please state the name of the City employee(s) and the Department, City Council Member(s) or JHCDC Board Member:

4. Are you, or any immediate family member, a City of Jacksonville employee(s), member of City Council, or member of the JHCDC?

(Please Check One): No

☐

Yes

☐

If yes, please state the name of the City employee(s) and the Department, City Council Member(s) or JHCDC Board Member and the relationship:

Signature: _____ Name: _____

Name of Current Employer: _____ Date: _____

(1) 24 C.F.R. §570.611 (CDBG); 24 C.F.R. §92.356 (HOME); 24 C.F.R. §574.625 (HOPWA); 24 C.F.R. §576.404 (ESG) and 2 C.F.R. §200.112 and/or any other citations applicable to any future funding that may be awarded to this jurisdiction.

City of Jacksonville
2026-2027 Universal Application Scoring Guide

Applicant Agency: _____

Project Name: _____

Grant Program (circle one): CDBG ESG HOPWA _____

Funds Requested: _____

Scoring Summary

Project Description (up to 25 Points): _____

Agency Summary (up to 40 Points): _____

Statement of Need (up to 15 Points): _____

Budget and Financial Analysis (up to 20 Points): _____

Total Score: _____

Reviewer Name: _____

Reviewer Signature: _____

Review Date: _____

Project Description Questions 1-9 (up to 25 Points)		
Item	Comments	Points Awarded
Question 1: ALL APPLICANTS: Does the applicant provide a detailed project description describing how the project will serve the target population within the narrative responses? (15 Points Maximum) <ul style="list-style-type: none"> • Yes = up to 15 Points 		
Question 2: CDBG ONLY: Applicant selects the service delivery area for the project.		Threshold requirement
Question 3: CDBG Service Delivery Information (10 Points Maximum) Is the agency providing a new service or expanding an existing service? <ul style="list-style-type: none"> • New Service not already available in the community = 10 Points • A New Service (for this agency) but the service is already available in the community (provided by another agency) = 5 Points • Expanding an Existing Service = 5 Points 		
Question 4: HOPWA ONLY - Service Delivery Information (10 Points Maximum) Does the applicant's program primarily provide for: <ul style="list-style-type: none"> • Tenant-Based Rental Assistance = 10 Points • Permanent Housing Placement = 10 Points • STRMU = 5 Points • Supportive Services only = 2 Points 		
Question 5: ESG ONLY - Service Delivery Information (10 Points Maximum) <ul style="list-style-type: none"> • Applicant selects the service delivery area for the project. <ul style="list-style-type: none"> ○ Street Outreach = 10 points ○ Domestic Violence = 10 points 		
Questions 6-9: ESG AND CDBG SELECTING HOMELESSNESS ONLY - Service Delivery Information <ul style="list-style-type: none"> • Question 6: Does the organization use HMIS? • Question 7: Does the organization participate in CoC organized Coordinated Entry? • Question 8: Has the organization adopted "Housing First" policy? • Question 9: Does the applicant have a letter of endorsement from the CoC Board of Directors, included as an attachment as outlined in document checklist and labeling procedures? 		Threshold requirement
Total Points for Project Description & Delivery		

Project Description - Additional Comments:

<u>Agency Summary Questions 10-25 (up to 40 points)</u>		
Item	Comments	Points Awarded
<p>Question 10: ALL APPLICANTS: (5 Points Maximum)</p> <p>Does key staff have the professional expertise to undertake the proposed program (resumes of COI of Board Member/Commissioners, Executive Management/Officers, and Program Staff) attached?</p> <ul style="list-style-type: none"> • Yes = up to 4 Points <p>Are specific staff members identified for the project in which funding is being requested?</p> <ul style="list-style-type: none"> • Yes = 1 Point 		
<p>Question 11: ALL APPLICANTS: Do multiple staff members associated with the project have relevant grants management experience?</p> <ul style="list-style-type: none"> • Yes = 1 Point 		
<p>Question 12: ALL APPLICANTS: Does the project manager have at least 5 years of relevant grants management experience? (3 Points Maximum)</p> <ul style="list-style-type: none"> • Yes = up to 3 Points • <u>OR</u> 3 to 5 years of experience = up to 2 Points • <u>OR</u> 1 to 3 years of experience = 1 Point 		
<p>Question 13: ALL APPLICANTS: Does the agency conduct a Level 2 State and National background check for employees, pursuant to Ch. 435, F.S.?</p>		Yes or No Threshold requirement
<p>Question 14: ALL APPLICANTS: Does the agency have client confidentiality procedures to ensure confidentiality of client files?</p>		Yes or No Threshold requirement
<p>Question 15: ALL APPLICANTS: Applicant included the overall number of staff dedicated to implementation of the project.</p>		Yes or No Threshold requirement
<p>Question 16: ALL APPLICANTS: Applicant included the number of staff dedicated to implementation of the project who have experience with City of Jacksonville grant programs.</p>		Yes or No Threshold requirement
<p>Question 17: ALL APPLICANTS: Applicant included the number of staff dedicated to implementation of this project who have experience with non-City of Jacksonville grant programs.</p>		Yes or No Threshold requirement
<p>Question 18: ALL APPLICANTS: Applicant included the number of staff dedicated to implementation of the project with no grant experience.</p>		Yes or No Threshold requirement
<p>Question 19: ALL APPLICANTS: Does the applicant provide a detailed project management plan?</p> <ul style="list-style-type: none"> • Yes = up to 10 Points 		

<p>Question 20: ALL APPLICANTS: Has the agency described their grant administration capabilities, financial grant management policies and procedures, and software for financial grant management?</p> <ul style="list-style-type: none"> • Yes = up to 5 Points 		
<p>Question 21: ALL APPLICANTS: Does the agency have and describe experience of key financial management staff dedicated to the specific program for which funds are being requested?</p> <ul style="list-style-type: none"> • Yes = up to 5 Points 		
<p>Question 22: ALL APPLICANTS: (3 Points Maximum)</p> <p>The applicant describes previous experience with grant programs:</p> <ul style="list-style-type: none"> • More than 3 years previous experience with City of Jacksonville grant programs = 3 Points • OR one to two years previous experience with City of Jacksonville grant programs = 2 Points • OR Previous experience with similar grant programs outside of City of Jacksonville = 1 Point 		
<p>Question 23: ALL APPLICANTS: Does the agency have and describe proper internal controls and separation of duties to properly manage public funds (administrative capabilities)?</p> <ul style="list-style-type: none"> • Yes = up to 5 Points 		
<p>Question 24: ALL APPLICANTS: Does the agency have a dedicated CFO or similar staff position?</p> <ul style="list-style-type: none"> • Yes = 3 Points 		
<p>Question 25: ALL APPLICANTS: For informational purposes only.</p> <ul style="list-style-type: none"> • N/A 		
<p>Total Points for Agency Summary Analysis</p>		

Agency Summary and Capacity - Additional Comments:

<u>Statement of Need Questions 26-31 (up to 15 points)</u>		
Item	Comments	Points Awarded
Question 26: ALL APPLICANTS: (5 Points Maximum) Does the applicant describe the project's target population and service delivery area, while using data to support the urgency of meeting this need? <ul style="list-style-type: none"> • Yes, Description = 4 Points • Yes, Includes Data = 1 Point 		
Question 27: ALL APPLICANTS: Does the applicant clearly describe the community problem or need that the project is designed to address? Up to 5 points		
Question 28: CDBG ONLY: Does the applicant's program primarily serve an eligible target population? (5 Points Maximum) <ul style="list-style-type: none"> • Homeless = 5 Points • Victims of Domestic Violence and/or Abuse = 4 Points • Elderly, Disabled Adults, Illiterate Adults = 3 Points • Primarily LMI population including PHA residents = 2 Points 		
Question 29: ESG ONLY: Does the applicant's program primarily serve an eligible target population? (5 Points Maximum) <ul style="list-style-type: none"> • Veterans = 5 Points • Persons with a Mental Health disorder and/or Substance Abuse issues = 3 Points 		
Question 30: HOPWA ONLY: Does the applicant's program primarily serve an eligible target population coming from one of the following housing situations within the last three months? (5 Points Maximum) <ul style="list-style-type: none"> • Homeless = 5 Points • Substance Abuse or Mental Health Facility = 3 Points • Hospital or Residential Care Facility = 2 Points 		
Question 31: The applicant clearly describes how the use of match and leverage funds improves implementation of the program.		Yes or No Threshold requirement
Total Points for Statement of Need		

Statement of Need - Additional Comments:

Budget and Financial Analysis (20 Points)

Item	Comments	Points Awarded
Proposed Project Budget (up to 5 points) <ul style="list-style-type: none"> • Is budget complete? <ul style="list-style-type: none"> ○ Yes = 1 Point • Is budget accurate? <ul style="list-style-type: none"> ○ Yes = 1 Point • Is budget appropriate for project type? <ul style="list-style-type: none"> ○ Yes = 1 Point • Are costs reasonable for project type? <ul style="list-style-type: none"> ○ Yes = 1 Point • Is all related supporting documentation provided? <ul style="list-style-type: none"> ○ Yes = 1 Point 		<div></div> <div></div> <div></div> <div></div> <div></div>
Match/Leverage Funds (up to 10 points) <ul style="list-style-type: none"> • Funding Commitment Letters Provided <ul style="list-style-type: none"> ○ 4:1 = 10 points ○ 3:1 = 8 points ○ 2:1 = 6 points ○ 1:1 = 4 points • Match Identified but Pending = 2 points (regardless of ratio) 		<div></div>
Agency Audit (up to 5 points) <ul style="list-style-type: none"> • Was audit on time? <ul style="list-style-type: none"> ○ Yes = 1 Point • Did audit have questioned costs? <ul style="list-style-type: none"> ○ No = 1 Point • Did audit contain significant deficiencies? <ul style="list-style-type: none"> ○ No = 1 Point • Did audit contain material weaknesses? <ul style="list-style-type: none"> ○ No = 1 Point • Did audit contain reportable conditions? <ul style="list-style-type: none"> ○ No = 1 Point 		<div></div> <div></div> <div></div> <div></div> <div></div>
Total Points for Budget & Financial Analysis		