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# Maryland

DEPARTMENT OF HOUSING  
AND COMMUNITY DEVELOPMENT

## Homelessness Solutions Program SFY2027 COC/LHC Application Overview

March 2nd, 2026

*Great Places* **WIN**



# Content

- Organization Profile Review
- Application and Budget Overview
- Project Performance Review Tool
- Project Portal Submission Refresher
- Questions?

# Organization Profile Review

Due: Friday March 16th, 2026

# Why do we need to complete the Organization Profile Review?

- In SFY26, DHCD updated a step in the HSP application process to have grantees submit their Organization Profile Review prior to the submission of the application narrative and budget.
- This minor adjustment allows the HSP team to complete the required threshold review in advance in order to allow additional time for application review and streamline the award process.
- Organization profile reviews, or threshold reviews are required to ensure applicants meet the basic requirements necessary to receive funding. Verified material include, but is not limited to, W9s, vendor registration and certificates of good standing.
- In previous years, the organization profile review was complete in conjunction with application scoring and budget review; requiring more time for processing and causing award delays for administrative errors.
- This earlier submission of the Organization Profile Review will allow the HSP team to work on award preparation documentation while Grantees continue to work on the application narrative, budget templates and project performance tool.

# Organization Review Components: Applicant Information

**Applicant Information**

Organization Profile	
Name	
Federal ID #	
Unique Entity Identifier #	
Street Address:	
City:	
County:	
State:	
Zip Code:	
Phone:	
Web Address:	

Primary Contact	
Name	
Title	
Address	
City	
State	
Zip Code	
Phone	
Email	

Secondary Contact	
Name	
Title	
Address	
City	
State	
Zip Code	
Phone	
Email	

- Complete this page in its entirety
- The Organization name should be reports as it is listed on the W9 and how it should be represented on your award agreement
- Ensure Federal ID# (FEIN) and Unique Entity ID (UEI) are correct and match your W9 and your vender registration
- The Organization address should match the W9, and where the organization is registered versus physically located
- Primary and secondary contacts should be persons authorized to complete the application and receive subsequent correspondence regarding the award



# Organization Review Components: Checklist of attachments

- W-9 with address and EIN that matches your state vendor registration (both governments and nonprofits)
- Agency Organizational Chart (both governments and nonprofits)
- Most Recent Single Audit or Independent Financial Audit (both governments and nonprofits)
- Articles of Incorporation and Bylaws (nonprofits only)
- Federal Tax Exemption Determination Letter (nonprofits only)
- Certificate of Good Standing from Maryland Department of Assessments and Taxation (nonprofits only)
- Copy of Charity Registration Status from Maryland Secretary of State website (nonprofits only)
- List of Board of Directors (nonprofits only)

**Submission:** The most recent and accurate versions of the material listed above should be uploaded to the Project Portal no later than **March 16th**. Once uploaded, return the Organization Profile Review Form including both components to the Program Director at [Latoya.arnold-artis@maryland.gov](mailto:Latoya.arnold-artis@maryland.gov).

# Application and Budget Overview

Due: Friday, April 17th, 2026

# Homelessness Solutions Program Overview

HSP prioritizes funding for projects that:

- Divert households who are at-risk of becoming homeless through creative problem-solving, safe family/friend reunification and mediation, and homeless prevention
- Rapidly and effectively connect people experiencing homelessness with mainstream benefits, income, and permanent housing opportunities
- Serve especially vulnerable groups, such as unsheltered individuals, unaccompanied youth, domestic violence survivors, and individuals with complex medical and behavioral health needs
- Implement evidence-based practices and demonstrate fidelity to best practice program models
- Deliver services in a safe, inclusive, equitable, and accessible manner

**Eligible activities** include street outreach, shelter, host homes, rapid re-housing, permanent supportive housing, homeless prevention/diversion, HMIS data entry and system administration, and administrative costs. More on this to come.

# Homelessness Solutions Program (contin.)

## Eligible applicants include:

1. A HUD-approved Collaborative Applicant/lead agency of a Maryland Continuum of Care (CoC),  
OR
2. A DHCD-approved lead agency for a Balance of State CoC Local Homeless Coalition (LHC)

## Expectations of Grantees

- Lead agencies may subgrant all or part of their HSP award to government agencies or nonprofit organizations to provide eligible services.
  - Subgrantees are expected to participate in Continuum of Care planning appropriate for the jurisdiction where the HSP services are provided.
- Grantees that are awarded HSP funding are required to perform due diligence in regards to organizational capacity of subgrantees before making awards.
  - Project selection should be based on objective processes and review of the agency's programs.
- Lead agencies will be required to complete risk assessments of subgrantees for financial and programmatic monitoring and ensure that programs are operating within the requirements and regulations of the program.



## Anticipated Funding Availability

Name	Sources	Anticipated Budget
Emergency Solutions Grant (FFY2026)	Federal- HUD	\$1,030,648
State HSP Funds (SFY2027)	Maryland	\$14,000,000
<b>Total Anticipated Funds</b>		<b>\$15,030,648</b>

- In state fiscal year 2027, DHCD anticipates nearly level funding for the State HSP and HUD ESG allocation. However, \$2 million in funding from State Rental Assistance used to supplement awards in SFY2026, will not be available this fiscal year. As a result, initial budget estimates are reduced. This award year we are able to estimate the CoC/LHC budget breakdowns listed in the application guidance based on current anticipated funding availability. Grantees should submit 1 detailed budget based on those estimates.
- The final award amount will be based on the community's application score and the actual amount of funding allocated to DHCD by HUD and the State of Maryland for SFY2027. Any significant deviation from these budget estimates will be communicated during the award notification process.
- SFY2027 HSP grant agreements will have an 18-month performance period – July 1, 2026 through December 31, 2027.

## Eligible Activities and Costs

### HSP provides funding for eight main activities:

- 1) **Homeless Prevention/Shelter Diversion**- programs that assist households remain in their permanent housing or relocate to other permanent housing when they are considered at-risk of becoming homeless. Eligible costs include rental assistance, financial assistance, and housing stabilization services.
- 2) **Emergency Shelter**- activities that connect people with immediate access to overnight shelter in order to respond to a crisis. Models may include Drop-In Centers, Hotel/Moteling, Host Home, etc. Funding provided for Emergency Shelter can be used to pay for the operations of the shelter, such as rent and utilities for the facility; as well as services provided by the shelter, such as case management and co-located support services. Any shelter that accepts children is considered a “Family” shelter and must accept all family compositions.
- 3) **Street Outreach**- services that are provided to currently unsheltered individuals and families, including engagement and case management. This activity also covers special events such as Homeless Resource Day and Point-in-time counts (see activity 7).
- 4) **Rapid Re-Housing**- assists households who are unsheltered or staying in emergency shelter or motel with obtaining permanent housing in a regular rental unit in the community. Eligible costs include rental assistance, financial assistance, and housing stabilization services. Note: RRH programs targeted to unaccompanied homeless youth may also serve households or clients meeting HUD categories 2 or 3 in their programs.

## Eligible Activities and Costs (contin)

- 5) **Permanent Supportive Housing**- provides households with non-time limited subsidized permanent housing and supportive services. HSP eligible costs include case management services linking residents to supportive services, as well as staff costs for those who assist clients in applying for food, medical, and other benefits. Additional eligible costs include leasing, operating, and rental assistance costs for project-based programs.
- 6) **Homeless Management Information System (HMIS)**- covers the costs of data collection through an HMIS database. All providers must enter data into HMIS or, for victim services providers, a comparable database.
- 7) **Special Events**- covers special events such as Homeless Resource Day events that are intended to connect people with available services; as well as activities to support the annual Point-in-Time (PIT) count. These activities are budgeted as sub activity under Street Outreach.
- 8) **Administration Support Cost**- Administration Support Costs covers funding used for staffing COC/LHC and Coordinated Entry personnel, Training and Technical Assistance, as well as conference and meeting costs. Funding in this category also supports initiatives to encourage the development of Youth Action Boards and Lived Experience Committees through stipends.

A full list and description of eligible activities, costs, and policies are available in the HSP Grantee Policy Guide.

# Application Components

## 8 Part Narrative Application (*Word Document*)

- Part 1: Strategy
- Part 2: Project Selection
- Part 3: System Performance
- Part 4: Coordinated Entry
- Part 5: Equity
- Part 6: Compliance and Quality
- Part 7: Youth Projects
- Part 8: RRH and PSH Projects

## Detailed Budget Template (*Excel spreadsheet*)

- COC/LHC and Program Budget Requests for eligible HSP activity
- Complete Project List for new and renewal projects

## Project Performance Review Tool (*Excel Spreadsheet*)

- Based on APR data from performance period January 1, 2025 thru December 31, 2025
- Complete for each renewal project on their respective activity tab

# Application Scoring Process

Scored Category	Maximum Points
Prior HSP Grant Spending History	5
Prior HSP Grant Compliance History	5
HMIS Compliance & Data Quality	5
Renewal Project Performance	50
<b>CoC Application</b>	
1. Strategy	10
2. Project Selection	20
3. System Performance	20
4. Coordinated Entry	10
5. Equity	10
6. Compliance and Quality	10
7. Youth Projects	5
8. RRH/PSH Projects	10
<b>Total Points Possible</b>	<b>160</b>

All applications will be subject to three reviews:

1. Organization Profile Review
  2. CoC/LHC Application Narrative Review
  3. Project-Level Performance Evaluation
- The Organization Profile Review ensures that the applicant is eligible and ready for award consideration
  - Once an applicant passes the threshold review, the application can be scored by DHCD staff based on the CoC/LHC application narrative, proposed budget activities and project performance review
  - Prior grant spending and compliance will also be considered during application scoring

# Application Checklist

- ❑ **Complete the Homeless Solutions SFY2027 Application Template and Budget Screen in the DHCD Project Portal**

*Note: The portal budget screen should include only one “activity”: Operating. This amount should be your entire requested budget amount*

- ❑ **Upload the following supporting attachments with your application in the portal:**
  - ❑ CoC/LHC Application – Word
  - ❑ Detailed Budget and Project Listing - Excel
  - ❑ Project Performance Tool- Excel
  - ❑ Performance Data
    - Stella P Report (see application template for more instructions)
    - 2025 System Performance Measures Report (see application template for more instructions)
    - HUD Annual Performance Report (APR) from HMIS for each renewal project (Performance Period: 1/1/2025-12/31/2025)
    - 2025 Housing Inventory Count and Point in Time Count Data

# Detailed Application Budget Template

Applicant budgets should be based on the COC/LHC budget table in the application guidance. Any significant deviations from the budget will be communicated during the award notification process.

## Budget Tabs

- Insert the COC/LHC name at the top of the spreadsheet
- In the column header, replace "Organization" and "Project Name" with the project information.
- Note whether a project primarily serves unaccompanied homeless youth.
- Enter the total annual operating cost for each project (including costs from all funding sources). This will automatically calculate the leverage amount based on the requested HSP allocation.
- Enter the funding requests per activity for each project included in your CoC/LHC application.
- Do not replace the formulas in any of the subtotal/total cells or the match/percent of project budget rows. Only enter data and numbers in white cells. If your CoC/LHC has more than 10 projects, create a second copy of the respective budget template.

## Project List Tab

- Complete each column for new and renewal projects
- Be sure to include both the HMIS project name and ID numbers as they appear on the APR
- Be sure to Indicate if the project is new or a renewal

# Budget Tab

HSP 27 Detailed Application Budget Template .XLSX

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CoC/LHC: Insert Name

**INSTRUCTIONS:**  
 Enter the funding request for each individual project included in your CoC/LHC application. In the column header, replace "Organization" and "Project Name" with the name of the organization and project. Note whether a project primarily serves unaccompanied homeless youth. Enter the total project budget (all funding sources) for each project. Do not replace the formulas in any of the subtotal/total cells or the match/percent of project budget rows. **Only enter data and numbers in the white cells.** If your CoC/LHC has more than 10 projects, create a second copy of the budget template.

	CoC/LHC Lead	Organization Project Name	Total CoC/LHC Budget										
<b>Youth Project?</b>													
<b>Total Annual Project Operating Budget (all sources)</b>	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$10.00
<b>Street Outreach</b>													
Street Outreach Services													\$0.00
Point-in-Time Count													\$0.00
Homeless Resource Day													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Shelter (Emergency, Transitional, and Host Homes)</b>													
Essential Services													\$0.00
Shelter Operations													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Rapid Re-Housing</b>													
Rental Assistance													\$0.00
Financial Assistance													\$0.00
Services													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Homelessness Prevention</b>													
Rental Assistance													\$0.00
Financial Assistance													\$0.00
Services													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>HMIS</b>													
HMIS Lead System Administration (HMIS Leads Only)													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Permanent Supportive Housing</b>													
Services													\$0.00
Project-Based Leasing/Operating/Rental Assistance													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Direct Cash Transfer Project</b>													
Financial Assistance													\$0.00
<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Flex Funds</b>													
Discretionary Funds													\$0.00

+ ≡ Level Funding Budget Project List



# Project Performance Tool

Due: Friday, April 17th, 2026

# Why do we need to complete the Project Performance Tool?

- COC/LHCs are expected to provide data via the project performance tool on renewal projects based on the APR run from HMIS. This will allow the HSP team to more efficiently assess project level data.
- The performance tool reviews data points related to service, data quality and equity. One essential question, for example, we expect to answer is, did the project serve the projected target?
- Project level evaluation also allows the HSP team to establish trends, monitor project level outcomes and set long term prioritizes.
- Completion of this tool also gives COC/LHC leads an opportunity to take a closer look at each project prior to submission for funding.
- Project performance tools should be completed in their entirety. Copies of project APRs should also be uploaded with the application for reference.
- The performance period for the APR should be January 1st, 2025 to December 31st, 2025.
- A sample APR has been marked up and shared that identifies where to find the requested data points.

Complete each column with the data point described. The APR number and question is provided. The Project Name and ID should correspond to the Name, ID and data from the APR being populated.

FY26 HSP Project Performance Tool

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A1:E2 Street Outreach Project Information (do not include Resource Days or Supportive Services Only Projects)

Street Outreach Project Information (do not include Resource Days or Supportive Services Only Projects)					Service								
Street Outreach Project Information (do not include Resource Days or Supportive Services Only Projects)					APR Q9a "Total Persons Contacted/ All Persons Contacted"	APR Q9b "Total Persons Engaged/ All Persons Contacted"	APR Q5a "Total Number of Persons Served/Coun t of Clients"	SFY2025 Project Proposed Number Served	APR Q23c "Percentage of persons exiting to positive housing destinations/ Total"	APR Q22b Average Length of Participation: "Average Length/Stayers"	APR Q19a2 Performance measure: "Percent of Persons who Accomplished this Measure/ Number of Adults with Any Income"	APR Q20b "Benefit at Exit for Leavers/ 1+ Sources"	APR Q21 "1 Source of Health Insurance/ At Exit for Leavers "
Project type	CoC	County/Region	Organization Name	Project Name and ID	Client Engagement			Exits and Length of Stay	Income and Benefits at Exit				
Street Outreach													
Street Outreach													
Street Outreach													
Street Outreach													
Street Outreach													
Street Outreach													
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Street Outreach													
Street Outreach													

Renewal Projects | Street Outreach | Emergency Shelter | Rapid Rehousing | Prevention | PSH

Ensure that data is populated on the correct tab and under the correct project type that corresponds with the APR set up.



There is a Notes column included at the end of each section to report any relevant information related to the project the HSP team should know. For example, if the project was not set up in HMIS correctly or if there was a significant event that impacted capacity, such as a maintenance issue.

FY26 HSP Project Performance Tool

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AT:E2 | Street Outreach Project Information (do not include Resource Days or Supportive Services Only Projects)

	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB
1	HMIS							EQUITY ASSESSMENT							Notes
2	APR Q21 "1 Source of Health Insurance/At Exit for Leavers"	APR Q21 "More than 1 Source of Health Insurance/At Exit for Leavers"	APR Q6a Personal Identifying Information: Overall Score/% of Issue Rate	APR Q6b Universal Data Elements: Highest % of Issue Rate' in Grid	APR Q6c Income and Housing Data Quality: Highest % of Issue Rate' in Grid	APR Q6d Chronic Homelessness: "Total/% of records unable to calculate"	APR Q6f Inactive Records: "Contact/% of Inactive Records "	APR Q13a2 "Total Persons/1 Condition"	APR Q13a2 "Total Persons/2 Conditions"	APR Q13a2 "Total Persons/3+ Conditions"	APR Q14a History of DV: "Total/ Yes"	APR Q5a "Number of Veterans/Count of Clients"	APR Q5a "Number of Youth Under Age 25/Count of Clients"	APR Q26a Chronic Homeless Status: "Chronically Homeless/Total"	
3	Data Quality														
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															

Renewal Projects | Street Outreach | Emergency Shelter | Rapid Rehousing | Prevention | PSH

A sample APR has been provided that highlights the required data points for each section, as well as if a data point is specific to a certain project type.

42091 01/28/2025 01:15:10 PM (0.27 mins) COCAPR BoS ES Carolyn Curry MD-514 HMIS Carolyn Curry Completed

Showing 1-4 of 4

### Report Options

Name: Test APR  
 Description:   
 Provider Type:  Provider  Reporting Group  
 Provider\*: ZZZ INACTIVE: SM\_TEST Shelter (887)  
 This provider AND its subordinates  This provider ONLY  
 Program Date Range\*: 07/01/2023 to 06/30/2024  
 Entry/Exit Types\*:  Basic  Basic Center  Program Entry/Exit  HUD  PATH  Call  RHY  Standard  Transitional Living  Program Entry/Exit  VA  HPRP (Retired)

CoC APR Report Results - Date Ran: 02/21/2025 02:22:27 PM - Report ID: 43820

### 4a - Project Identifiers in HMIS

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	All
Organization Name	Org. ID	Project Name	Project ID	HMIS Project Type	RRH Subtype	Coordinated Entry Access Point	Affiliated with a residential project	Project IDs of Affiliation	CoC Number	Geocode	Victim Service	HMIS Software Name and Version Number	Report Start Date	Report End Date	Total Active Clients	Total Active Households											
MD-514 HMIS	8	ZZZ INACTIVE: SM_TEST Shelter	887	Missing		Missing			MD-508	249037	No	WellSky Community Services	2023-07-01	2024-06-30	0	0											

Showing 1-1 of 1

### 5a - Report Validations Table

Report Validations Table	Count of Clients for DQ	Count of Clients
1. Total Number of Persons Served	0	0
2. Number of Adults (age 18 or over)	0	0
3. Number of Children (under age 18)	0	0
4. Number of Persons with Unknown Age	0	0
5. Number of Leavers	0	0
6. Number of Adult Leavers	0	0
7. Number of Adult and Head of Household Leavers	0	0
8. Number of Stayers	0	0
9. Number of Adult Stayers	0	0
10. Number of Veterans	0	0
11. Number of Chronically Homeless Persons	0	0
12. Number of Youth Under Age 25	0	0

### 6f - Data Quality: Inactive Records: Street Outreach and Emergency Shelter

	# of Records	# of Inactive Records	% of Inactive Records
Contact (Adults and Heads of Household in Street Outreach or ES - NBN)	0	0	0%
Bed Night (All clients in ES - NBN)	0	0	0%

### 7a - Number of Persons Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Adults	0	0	0	0	0
Children	0	0	0	0	0
Client Doesn't Know/Client Prefers Not to Answer	0	0	0	0	0
Data Not Collected	0	0	0	0	0
<b>Total</b>	0	0	0	0	0
For PSH and RRH - the total persons served who moved into housing	0	0	0	0	0

### 7b - Point-in-Time Count of Persons on the Last Wednesday

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	0	0	0	0	0
April	0	0	0	0	0
July	0	0	0	0	0
October	0	0	0	0	0

### 8a - Number of Households Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	0	0	0	0	0
For PSH and RRH - the total households served who moved into housing	0	0	0	0	0

### 8b - Point-in-Time Count of Households on the Last Wednesday

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January					
April					
July					
October					

4 CoC APR - Community Services <https://wscs.wellsky.com/mdbos/com.bowmansystems.sp5.core.Sc>

### 9a - Number of Persons Contacted

	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine
Once	0	0	0	0
2-5 Times	0	0	0	0
6-9 Times	0	0	0	0
10+ Times	0	0	0	0
<b>Total Persons Contacted</b>	0	0	0	0

### 9b - Number of Persons Engaged

	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine
Once	0	0	0	0
2-5 Times	0	0	0	0
6-9 Times	0	0	0	0
10+ Times	0	0	0	0
<b>Total Persons Engaged</b>	0	0	0	0
<b>Rate of Engagement</b>	0%	0%	0%	0%



# Project Portal Submission Refresher

# Organization Profile Update and Uploads

From an authorized officials account... select "Profile"

MARYLAND  
Department of Housing and Community Development

NEIGHBORHOOD REVITALIZATION  
DHCD Project Portal  
GRANTS MANAGEMENT SYSTEM

Home Administration - Searches - Reports -

LaToya Arnold-Artis -

## Dashboard

Instructions:

- Click on an Opportunity Name to start applying for the Opportunity.
- The 'My Tasks' panel will show documents that are currently in process or are in need of attention.

### My Tasks

Initiate Related Document

› Filter

› My Tasks

Confirm that the user information and organization is current and accurate. Click **SAVE** before moving to the next tab.

**MARYLAND Department of Housing and Community Development**

NEIGHBORHOOD REVITALIZATION  
**DHCD Project Portal**  
GRANTS MANAGEMENT SYSTEM

Home Administration - Searches - Reports -

LaToya Arnold-Artis

**Organization Information**

Maryland Department of Housing & Community Development

Organization Information  
Organization Members  
Organization Categories  
Organization Uploads  
Organization Demographics

## Person Information

- Complete or edit the person profile and organizational role information.
- Required fields are marked with a red asterisk (\*)
- To request changes or additions to organization membership or roles, contact a system administrator at [NRSystemSupport.dhcd@maryland.gov](mailto:NRSystemSupport.dhcd@maryland.gov)

### Profile

#### Basic Information

First Name \*  Middle Name

Last Name \*  Prefix \*  Suffix

Title \*

#### Contact Information

Primary Phone \*

Cell

Email \*

### Organizations

Maryland Department of Housing & Community Development

Role Name	Active Date	Inactive Date	Assigned By
NR Assistant Director	11/29/2023		Holtzapfle, Bryan

Activate Windows

Update and upload all required supporting documents to upload tab. Click **SAVE** before moving to the next tab.

The screenshot displays the 'Organization Uploads' page within the 'DHCD Project Portal GRANTS MANAGEMENT SYSTEM'. The header includes the Maryland Department of Housing and Community Development logo and the user name 'LaToya Arnold-Artis'. The left sidebar contains navigation options such as 'Person Information', 'Organization Information', and 'Organization Uploads'. The main content area features a red banner for 'ORGANIZATION TYPE DESCRIPTIONS' and a form with radio buttons for 'Government Organization', 'Non-Profit Organization', and 'For-Profit Organization, Consultant or Contractor'. A yellow arrow points to the 'Government Organization' option. Below this, there is a section for 'Non-Profit Organization Sub-Type(s)' with a dropdown menu for 'IRS Designation' set to '501(c)3'. At the bottom, there are several checkboxes for organization types, with 'Community Development Organization', 'Community Foundation', and 'Community Development Financial Institution' checked. A watermark for 'Activate Windows' is visible in the bottom right corner.

# Application Submission

The HSP27 application should now be visible on your Project Portal Dashboard under My Opportunities as the Community Development and Services Application FY2027.

**My Tasks**

> Filter

> My Tasks

**Announcements**

**FY2027 TECHNICAL ASSISTANCE GRANT (OAG-TAG) APPLICATION NOW OPEN**

The FY2027 Operating Assistance Grants - Technical Assistance Grants (OAG-TAG) application is now available using the FY2027 Community Development and Services application template in the DHCD Project Portal system. Eligible applicants include nonprofit organizations, local governments, and local development corporations involved in community and economic revitalization activities. For complete program information visit <https://dhcd.maryland.gov/Communities/pages/tag/default.aspx> The application deadline is **Friday, March 20, 2026 at 5:00 PM EST**

**FY 2027 HOMELESSNESS SOLUTIONS PROGRAM (HSP) APPLICATION NOW OPEN**

The FY2027 Homelessness Solutions Program (HSP) application is now available using the FY2027 Community Development and Services application template in the DHCD Project Portal system. Only the designated and eligible lead agencies for the 16 Maryland Continuums of Care (CoC) and Local Homeless Coalitions (LHCs) are invited to apply on behalf of the homeless service providers in their communities. For complete program information visit <https://dhcd.maryland.gov/HomelessServices/Pages/GrantFunding.aspx>. The application deadline is **Friday, April 17, 2026 at 5:00 PM EST**.

**My Opportunities**

> Filters

My Opportunities

Name	Provider	Availability	Description
<a href="#">Community Development and Services Application FY2027</a>	Maryland Department of Housing & Community Development	2/20/2026 8:00:00 AM - 3/20/2026 5:00:00 PM	CDS Application FY27

Activate Windows



Click "Proceed" to initiate the application.

**Community Development and Services Application FY2027**

**Provided By:** Maryland Department of Housing & Community Development

**Provided To:** [REDACTED]

**Community Development and Services Application Availability Dates:** 2/20/2026 8:00:00 AM - [REDACTED]

**Due Date:** [REDACTED]

**Description:**

The Maryland Department of Housing and Community Development's **Community Development and Services (CDS)** applications are available using the FY2027 Community Development and Services template in the DHCD Project Portal system.

Funding opportunities offered through this CDS application template are available only to local governments and nonprofit organizations within the State of Maryland. Specific eligibility restrictions and requirements are determined by each funding program.

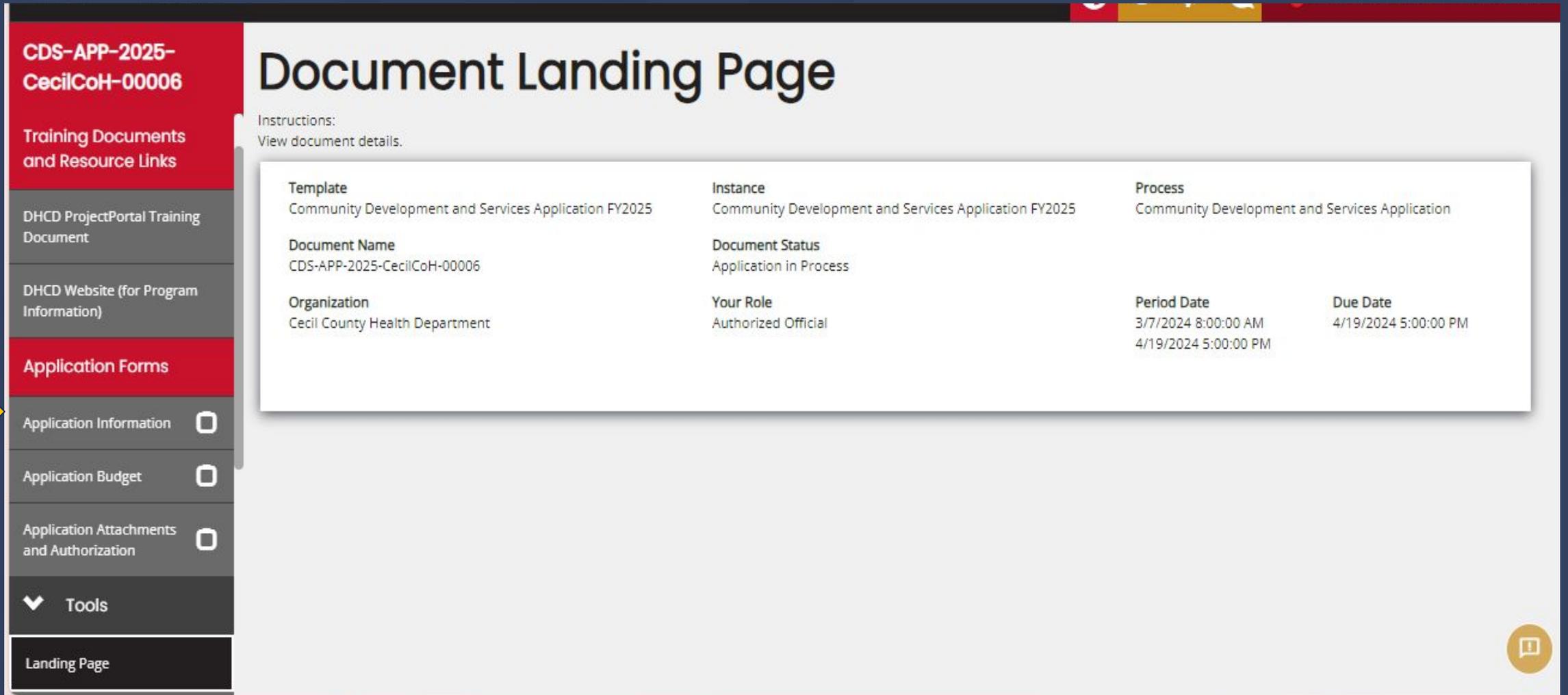
For funding program guidelines, information, requirements, training opportunities, and contact information, visit the Local Government & Nonprofits section of the [Maryland Department of Housing and Community Development](https://dhcd.maryland.gov) website.

Each funding program has separate opening and closing / deadline dates. View the [FY 2027 Application Schedule](#). Dates and program availability are subject to change. **No applications will be accepted after the program's due date.**

**Proceed** **Cancel**

Name	Provider	Availability	Description
<a href="#">Community Development and Services Application FY2027</a>	Maryland Department of Housing & Community Development	2/20/2026 8:00:00 AM - 3/20/2026 5:00:00 PM	CDS Application

Begin the application from the first bullet under Application Forms. Select “Application Information”



**CDS-APP-2025-CecilCoH-00006**

**Document Landing Page**

Instructions:  
View document details.

<b>Template</b> Community Development and Services Application FY2025	<b>Instance</b> Community Development and Services Application FY2025	<b>Process</b> Community Development and Services Application	
<b>Document Name</b> CDS-APP-2025-CecilCoH-00006	<b>Document Status</b> Application in Process		
<b>Organization</b> Cecil County Health Department	<b>Your Role</b> Authorized Official	<b>Period Date</b> 3/7/2024 8:00:00 AM 4/19/2024 5:00:00 PM	<b>Due Date</b> 4/19/2024 5:00:00 PM

**Application Forms**

- Application Information
- Application Budget
- Application Attachments and Authorization

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Complete the Application Information page. Be sure to complete/ update any missing information in the organization information section.

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DHCD Website (for Program Information)

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Is the applicant organization information correct? \*  Yes  No

Is the organization address listed above the same as the mailing address? \*  Yes  No

Provide the Primary Contact information for this application. Should the Department have any questions about this application, this person will be contacted by DHCD Program Staff.

Contact Name: Prefix:  \* First:  \* MI:  Last:  \* Suffix:

Contact Title:  \*

Contact Phone Number:  \*

Contact Email:  \*

**APPLICATION DETAILS**

*The Community Development and Services System supports multiple programs. All programs may not be open at this time and you may not be eligible for all programs. **Please Do Not Apply for a specific program unless (1) you have previously submitted an eligible application and/or discussed eligibility requirements with program staff or (2) you have been notified by program staff that the window is open for applications.***

Select the DHCD Program for this application:  \*

Enter a Name for this application's Program or Project:

Print | Save

Next Form >

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**APPLICATION DETAILS**

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Select the DHCD Program for this application:

Enter a Name for this application's Program or Project:

*Provide a short program/project name for this application, limited to 100 characters.*

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Enter a Short Description for this application's Program or Project:

*Provide a short description for this application, limited to 250 characters*

Next Form >

**UNDER APPLICATION DETAILS:**

For the DHCD Program.. select Homelessness Solutions Program.

For the Program Name use:  
*{Agency Name} HSP SFY27 Program Application*

For the short description use:  
*"{Agency Name} is applying for Homelessness Solutions Program funding, to provide services and housing stability to prevent and end homelessness for Maryland residents."*



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**APPLICATION REQUEST AMOUNTS**

What type of funds are you requesting? \*

Capital
  Operating/Non-Capital
  Both

Operating/Non-Capital Amount Requested: \$  \* Required if "Operating/Non-Capital" or "Both" is selected

Total Amount Requested: \$0.00

Total Program/Project Cost: \$  \*

Leverage: \$

---

**PROGRAM/PROJECT ADDRESS LOCATION**

Is the Program/Project Address of this application the same as the Organization Address (as listed above)? \*

Next Form >

The funding type is: Operating/ Non- Capital.

Enter the Total HSP Amount Requested

Enter the Total Program Costs (all funding sources)

\*Leverage estimates will populate automatically.

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**PROGRAM/PROJECT ADDRESS DESIGNATIONS**

In which federal, state, or local designation(s) will this program/project activities occur? \*

*Check all that apply. If none of the activities will occur in any of the designations listed below, check the box for "None of the Above"*

*For assistance identifying program/project locations and designations, visit and enter an address using the [DHCD Neighborhood Revitalization Mapper Tool](#) website.*

Arts & Entertainment District

Name:

Base Realignment and Closure Zone (BRAC)

Name:

Enterprise Zone

Name:

Next Form >

For Program/ Project Address State Designation:

Scroll to the bottom of this section and select, "None of the Above"



Application Community Needs, Strategies and Outcomes: This questions will be addressed in the narrative of the application. Please just enter, "See Attached" in these fields. Click **SAVE** before moving to the next tab.

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APPLICATION COMMUNITY NEEDS, STRATEGIES, AND OUTCOMES

*Instructions: In order to answer the questions below, please first review the "CDS Application Questions: Key Terms and Definitions" for guidance.*

Briefly describe the Community Investment Needs that will be addressed by this program or project. \*

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What is your overarching Strategy to address the community need(s)? What specific Activities will be undertaken to address the need(s)? \*

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What specific Outputs will result from investment in this strategy and set of activities? \*

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What are the broader Outcomes you anticipate will result from this investment? What impact will this investment have on the community need(s) identified above? \*

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Next Form >

## Application Budget Tab:

Create ONE activity/use of funds called “HSP Operating”.

Under Requested Amount, enter the total amount of your CoC/LHC request in the “operating amount” box of the activity line.

Under Other Source Amount, enter the leverage amount and label it “leverage”

A summary of the budget breakdown should populate below the budget table.

Click **SAVE** before moving to the next tab.

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Training Documents  
and Resource Links

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DHCD ProjectPortal Training  
Document

---

DHCD Website (for Program  
Information)

---

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Document Validation

APPLICATION PROGRAM/PROJECT BUDGET TABLE
Print | Save

*Instructions: Complete program/project budget indicating activity by line item and source of funding.*

Capital Amount Requested: \$0.00

Operating/Non-Capital Amount Requested: \$0.00

Total Amount Requested: \$0.00

Total Program/Project Cost: \$0.00

Activity/Use of Funds	Requested Amount(s)		Additional Source(s) of Funds			Totals By Use of f
	Capital Amount	Operating/Non-Capital Amount	Applicant Amount	Other Source Amount	Name of Other Sources	
	\$ 0	\$ 0	\$ 0	\$ 0		
	\$ 0	\$ 0	\$ 0	\$ 0		
	\$ 0	\$ 0	\$ 0	\$ 0		
	\$ 0	\$ 0	\$ 0	\$ 0		

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# Application attachments: For DHCD Program Application Form attach the HSP Application Narrative

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**APPLICATION FORMS AND SUPPLEMENTAL DOCUMENTS**

Each application Type has a different set of requirements and attachments. Refer to the specific program's Guidelines and contact the DHCD Program Staff to obtain templates or for assistance.

DHCD Program Application Form \*

Attach the DHCD Program-Specific application form in the space below.

Uploads are limited to 25 Mb per page save.

The following attachment is not applicable to Operating Assistance Grant programs.

Drag Files Here

**DHCD Program Required Supplemental Forms and Exhibits**

Attach all supplemental application materials, select the attachment category, and provide a brief, identifying file description for each attachment below, as required by the selected DHCD funding program. Your application may be denied if all materials are not provided.

Refer to the funding Program Guidelines, checklists, and web-pages for more information, or contact DHCD Program Staff for assistance.

Reminder: Many of the required organizational documents (Articles of Incorporation, IRS Determination, Board List, etc.) are stored on your Organization Profile/Organization Uploads page and should be maintained at that location to be included by-reference with your application submission.

Uploads are limited to 25 Mb per page save.

<u>File Attachment/Upload</u>	<u>File Description</u>	<u>Attachment Category</u>
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Uploads are limited to 25 Mb per page save.

File Attachment/Upload	File Description	Attachment Category
<input type="button" value="Browse"/> <input type="text" value="Drag Files Here"/>	<input type="text"/>	<input type="text"/>

### ADDITIONAL SUPPORTING DOCUMENTS

Attach any additional or supporting documents below and provide a brief, identifying file description for each attachment.

Uploads are limited to 25 Mb per page save.

File Attachment/Upload	File Description
<input type="button" value="Browse"/> <input type="text" value="Drag Files Here"/>	<input type="text"/>

## Required Supplemental Forms:

Attach...

- ✓ Detailed Budget Template
- ✓ Project Performance Tool
- ✓ System Performance Measures Report
- ✓ Stella P Report
- ✓ HIC and PIT Files
- ✓ APRs from HMIS for each renewal project

Click **SAVE** before moving to the next tab.

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**Status Options**

Submit Application

Cancel Application

Browse Drag Files Here

Print Save

**ADDITIONAL SUPPORTING DOCUMENTS**

Attach any additional or supporting documents below and provide a brief, identifying file description for each attachment.

Uploads are limited to 25 Mb per page save.

File Attachment/Upload	File Description
Browse Drag Files Here	

**APPLICATION AUTHORIZATION**

Review the application pages to make sure all required questions have been answered and required documents attached; and then enter your name and title. Click "Save" prior to submitting the application.

Authorizing Signature Name:

Authorizing Signature Title:

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## Submitting the application:

1. **SIGN** the form
2. Click **SAVE** (at the top right corner of the page) \*if you skip this step, the information you entered will not be saved.
3. Under **Status Options** on the left panel (you may need to scroll down)...select "Submit Application"

# Questions?