# York Region Community Investment Fund 2023 Housing Stability Call Preview of Application Questions

# **Applicant Information**

You must be an authorized decision maker or have been nominated to make this application by the Applicant's Chief Executive Officer of Executive Director to complete and submit this application
☐ I confirm I have been given the authority to submit this application
What is the name of the organization submitting this application ('the Applicant')?
What is the address of the Applicant?
Primary Contact
The Applicant's <b>primary contact</b> is the designated person who has the authority to submit this application and to respond to questions or inquiries about this application. <b>Confirm the Applicant's primary contact for the purposes of this application.</b>
Name:
Position:
Email:
Phone:
Signatory Contact
The Applicant's <b>signatory contact</b> is the person who has signing authority to legally bind the Applicant and will be responsible for signing a York Region Community Investment Fund Agreement, should the application be successful in this funding opportunity (i.e., Executive Director or Chief Executive Officer).  Indicate the Applicant's signatory contact.
Name:
Position:
Email:
Phone:

#### **Alternate Contact**

York Region may have inquiries related to your application, if information is missing or requires clarification, that will require a response within 48 hours.

Confirm an alternate contact that can respond to inquiries in the event that the primary contact is unavailable.

Name:

Position:	
Email:	
Phone:	
Describe the Applicant's typical activities, service Include the Applicant's mandate and/or guiding state	• •
Describe the Applicant's experience delivering solution include your agency's mandate and/or guiding statement	services to York Region residents.
On average, how many paid staff did the Applica regardless of full-time or part-time status?	ant have over the last 12 months,
On average, how many volunteers did the Applic regardless of the number of hours volunteered?	· · · · · · · · · · · · · · · · · · ·
What was the Applicant's total revenue for the m	nost recent fiscal year?
Identify the Applicant's top 5 revenue sources at through each source for the most recent fiscal y Include names of organizations that provided the funding, when	ear.
Is this a Collaborative Application?	
A collaborative is made up of two or more agencies that wish towards a mutual benefit, and share decision-making and acceptance.	
□ Yes □ No	
Funding Request	
Provide the following details related to the fundi Note that projects are expected to start October 1, 2	<b>.</b>
<ul><li>a. Total budget request for full project du</li><li>b. Proposed service term (in months):</li><li>c. Projected project end date:</li></ul>	ration:
Provide reasoning for the requested service terr	n (e.g., single vs. multi-year).
In which area(s) of York Region will services be	delivered?
<ul><li>Town of Aurora</li><li>Town of East Gwillimbury</li></ul>	<ul><li>□ Town of Georgina</li><li>□ Township of King</li></ul>

	City of Markham	□ City of Vaughan
	Town of Newmarket	☐ Town of Whitchurch-Stouffville
	City of Richmond Hill	
Drovido dot	oile on how convices will be delivered (o.g., in	noroon virtual mobile)
Provide det	ails on how services will be delivered (e.g., ir	i-person, virtuai, mobile).
Will access	to the program be free?	
	Yes	
	No (If no, describe the amount and reasoning f	or the cost.)
	peing requested to supplement, enhance, or entering delivered by the Applicant, or is the propo	
	Proposed project is new Supplement, enhance, or expand a pre-existing	g project or initiative
	escribe the current project. How is it funded? How will Con hance, or expand it?	nmunity Investment Funding supplement,
Project Des	scription	
What is the	name of the proposed project?	
Provide a b	rief summary of the proposed project. (appro	x. 2 sentences)
What is the	focus of the proposed project?	
	Help residents to find and secure housing Help residents who are at-risk of losing their h	ousing
Provide a b	rief explanation of how the proposed project	fits into these categories.
Provide a de	etailed explanation of the proposed project a	ctivities and approaches.
intends to a	e housing-related community service needs address?  istical, parrative, or anecdotal evidence supporti	

Describe how the proposed project addresses the identified service need(s).

the services to address the need.

Refer to evidence-informed approaches, research, community-based data, and/or engagement people with lived experience that support the program logic.

If there are other similar programs in York Region, describe how this project will interact with

If there are other similar programs in York Region, describe how this project will interact with the services to address the need.

In addition, describe how your services will include strategies to promote housing stability in the long term.

### **Target Population**

The Community Investment Fund will focus on supporting projects that address the needs of residents from marginalized groups that would most benefit from programs and services.

#### Which CIF Priority Group(s) is your project intended to serve?

Indigenous, Black, and other racialized populations
Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, Intersex (2SLGBTQI+)
Newcomers
People living with disabilities
Residents living in focus areas identified under the Community Safety and Well-being
Plan for York Region
Residents living with low income
Seniors
Women

Provide details about the CIF Priority Group(s) your project is designed to serve (e.g., specific racial group, age, languages spoken, etc.) and outline the Applicant's experience delivering services to identified group(s).

How will your project be delivered in a manner that will be effective in responding to the unique service needs of the priority group(s) you identified?

Describe any approaches or adaptations that enhance cultural safety, where applicable. Include any strategies to engage the priority group and/or reduce barriers to accessing services.

## **Project Evaluation and Sustainability**

#### What are the expected outcomes for this project?

Consider outcomes at the applicable levels (e.g., client, staff, program, agency, and/or York Region).

# Where applicable, provide the number of Unique Residents intended to be served for the timeframe:

Unique Residents are the total number of distinct individuals served by a project, such that a client who receives services multiple times is only counted once.

Q4 2023 (Oct. 1 2023 to Dec.31 2023):
2024:
2025:
2026:
Total estimate across service term:

How will the project be monitored and evaluated? How will you know that you achieved the outcomes for Residents? Be as specific as possible by including evaluation approaches, indicators, data sources, and data collection methods.

How will results be used to improve service delivery over time?

Are there potential risks or challenges related to the successful delivery of this project? If so, describe the steps that will be taken to avoid them.

Describe how the Applicant will sustain the initiative beyond the funding term, should the Applicant wish to continue the service.

The Community Investment Fund provides time-limited funding. Funding for this application will only be available for up to 39 months (3 ¼ years) beginning October 1<sup>st</sup>, 2023.

Include any additional comments about the application that you may wish to share. (approx. 200 words)