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| St. Louis County, MN | St. Louis County, Minnesota Emergency Solutions Grant (ESG) APPLICATION | Form**1002**Rev. 6/12/2023 |
| **About:** The ESG program provides funding to: (1) engage homeless individuals and families living on the street; (2) improve the number and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents, (5) rapidly re-house homeless individuals and families, and (6) prevent families and individuals from becoming homeless.For more information, see our website at: <https://www.stlouiscountymn.gov>  |
| APPLICANT INFORMATION  |
| Organization/Applicant Name       |
| Type of Organization  [ ]  Government [ ]  Non-profit | Daytime #      | Date       |
| Address        | City       | State      |  ZIP       |
| Email        |
| Contact Person *(If applicable)*      | Contact Person #       |
| Federal Id Number      | UEI Number      |
| PROJECT INFORMATION  |
| Project Title       |
| Site Address *(If applicable)*       | City       |
| PROJECT TYPE |
| [ ]  Emergency Shelter [ ]  Street Outreach [ ]  Prevention and Rapid Re-Housing [ ]  HMIS |
| FUNDING REQUEST |
| Amount of ($) of ESG Request |       |
| Amount of ($) of Community or Agency Resources |       |
| Amount ($) from Other Sources  |       |
| Total Project Cost ($) | $0.00 |

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| APPLICATION NARRATIVE |
| Please explain the proposed services and how they address needs identified in the St. Louis County Continuum of Care.       |

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| APPLICATION NARRATIVE |
| Please explain the client outcomes targeted by the proposed services and how they will be measured.       |
| ORANIZATIONAL STRUCTURE |
| Please list members of the project team and describe their roles. |
| Members | Role |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
| AGREEMENT |
| Authorized Applicant Name:       | Title       | Date:       |
| Please type your name or print and sign. |

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| **BUDGET WORKSHEET** |
| **Estimated source and use of funds** |
| **Use of Funds** | **Source of Funds** |
|  | **ESG Request** | **Total Community or Agency Resources**  | **Other Fund Source**      | **Other Fund Source**      | **Other Fund Source**      |  |
| **Expected Start and End date of funding** | Begin 05/01/2023End 10/31/2024 | Begin      End       | Begin      End       | Begin      End       | Begin      End       |  |
| **Status of Funding** |  | Committed [ ] Applied [ ]  | Committed [ ] Applied [ ]  | Committed [ ] Applied [ ]  | Committed [ ] Applied [ ]  |  |
| **Itemize Activity/Use of Funds below:** |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
|       | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $ 0.00 |
| TOTAL | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |