

# Homelessness Prevention Program (HPP) 2025-2026 Application and Budget Guide

The Homelessness Prevention Program (HPP) objective is to support communities in preventing, addressing and reducing homelessness, including chronic homelessness.

For the 2025-2026 funding cycle (April 1, 2025, to March 31, 2026), a total of \$500,000 is available for Support Program Projects. Additional funding may become available based on the quality of proposals received.

There is no restriction or maximum limit on the amount of funding an applicant may request. The quantity and quality of proposals received will determine the number of projects funded and the amount of funding each project receives.

The need in the community is great and demand from community organizations for funding will likely exceed the available amounts. This application form will allow Oxford County to assess all proposals and determine where funds should be allocated.

Proposals will be reviewed based on the following criteria:

- Assisting organizations in creating or maintaining programs which provide a benefit or service to Oxford County residents.
- The proposed support program will assist your organization in creating new or maintaining existing programs that provide a benefit or service to County residents. For example: serving vulnerable populations, social services agencies, support for individuals experiencing homelessness, meal and food programs, etc.
- The proposed support program will meet the Homelessness Prevention Program guidelines.
- The proposed support program will be consistent with the actions of the Oxford County Homelessness Response Strategy.
- Funds requested are to be utilized to maintain existing or create new programs within the boundaries of Oxford County.
- The organization must demonstrate that it is presently exploring or has fully explored
  potential funding from other sources, from other levels of government, the private sector,
  memberships, donations and fundraising activities. Organizations must demonstrate that
  they are seeking alternative sources of revenue on an ongoing basis to achieve selfsufficiency.

- Organizations seeking funding must be incorporated or in the process of applying for incorporation as a non-profit organization and/or a registered charity.
- Applications must be submitted prior to <u>September 18, 2025</u>, to be included in the following year's budget. Applications must be accompanied by a budget for the year in which the funds are applicable, outlining all other sources of revenue and expected expenditures.
- Confirmation of coverage for Insurance and WSIB will be required, and the County will need to be named as Additional Insured for funded agencies.

Applicants will be informed of funding approval or regret, after being reviewed and approved by the County.

#### **General Business Information**

- 1. Indicate if your organization is one of the following types of business:
  - Registered Charitable Organization established and operated exclusively for charitable purposes; is designated by the CRA as a charitable organization, a public foundation, or a private foundation.
  - Non-Profit Organization can operate for social welfare, civic improvement, pleasure, sport, recreation, or any other purpose except profit; cannot operate exclusively for charitable purposes.
  - o *Private Business* a company that is owned by one person or a small group of people, nongovernment owned companies.
- 2. Enter the legal name used in the organization's incorporation documents.
- 3. Enter the register primary address of the organization.
- 4. Enter the city or town of two of the registered primary addresses of the organization.
- 5. Enter the province of the registered primary address of the organization.
- 6. Enter the Postal Code of the registered primary address of the organization.
- 7. Enter the primary phone number for the organization.
- 8. Provide the organization's incorporation number.
- 9. Provide the date of incorporation for the business.
- 10. Enter the organization's business number as registered with the Canada Revue Agency (CRA). The Business Number (BN) is a unique number that the CRA assigns your business as a tax ID. It is a nine-digit number that is unique to your business and that is used when dealing with federal, provincial, or local governments. In administering the Homelessness Prevention Program, Oxford County will make every effort to respond to community needs in federal recognized official languages. Please indicate your preferred language for communication.

#### **Signing Officers**

- Please indicate the number of signatures that are required to bind your organization into a legal agreement. This number is according to your letters patent or other incorporating documents.
- Please list the names and titles of your legal signing officers.

### **Application Contact**

Application Contact refers to the person whom Oxford County should contact for clarification
on this application. If your application is successful, this person will be the primary project
contract for Oxford County concerning implementation of project activities and reporting.

#### **General Project Information**

- Enter the full name of the project and, if appropriate, any acronym.
- Project duration refers to the total number of months or years the project will operate.
- The start date of the project can be no earlier than **April 1, 2025**, and the end date can be no later than **March 31, 2026**. Funds must be utilized in the year they are assigned.
- Identify the location/address of any project activities that occur in a location other than the legal address of the organization.

# **Project Funding Details**

- Complete the HPP Financial Reporting template (Tab 3 Project Operating Expenditures)
- Project Financial Contact will be the person responsible for submitting all required financial reporting and the primary contact for Oxford County on any financial related matters concerning this project.
- Please describe how your proposed project will be funded. Include all anticipated sources of funding, including the funding requested in this application in the first row.
- Indicate the anticipated funding needed for the project, include all sources of funding including this proposal and any in-kinds sources that may contribute to the project.
- Applications that leverage multiple sources of funding and/or strategic partnerships will be given priority; as well as applications that include additional sources of income that match or exceed the funds requested.

#### **Project Description**

- Briefly describe the project that you are proposing. Please note that this description may be used for internal and external Oxford County communications and will act as a summary for County records.
- Describe how the proposed project will address homelessness within our community and will directly address the actions of the County's Homelessness Response Strategy

#### **Project Collaborations/Partnerships**

- Please indicate the names and roles of any other organizations that you are actively collaborating with on this project.
- Please start by listing your organization's role in the project.
- Within your description of the roles, please describe the level of involvement that each partner will have in the project. Examples of roles of collaborating organizations may include, but are not limited to:
  - o Co-design and coordination
  - Shared delivery of programming
  - o Providing mentorship or guidance to the lead agency
  - o Providing financial or in-kind supports to the project

#### **Coordinated Access**

- Please describe how your agency currently participates in Coordinated Access. Explain your organization's experience with the Coordinated Access system. If your organization is currently not involved with the Coordinated Access system, explain your future intentions and what resources will be allocated towards this.
- Please briefly describe how this project would contribute to the Coordinated Access system, including how this project will interact with other programs/services and fill gaps in current service delivery.

## **Declaration and Signatures**

 The signatories must correspond to those individuals identified in the legal signing authority section. If you can provide electronic signatures within the fillable application form, please do so. If you are unable to do so, print this last page, have it signed by all the required signatories and attach a scanned copy with your electronic application.

# **Oxford County - Human Services**

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