



HomeOKC

**OKLAHOMA CITY
HOMELESS SERVICES**

2020-2021

**Emergency Solutions
Grant-COVID (ESG-CV)
Application**



Agency: _____ DUNS Numbers: _____

Project Name: _____

Agency Contact Person: _____

Email Address: _____ Phone: _____

Agency Address: _____

1. Proposed Activities/Amount Requested

Activity	Amount Requested	Estimated # of households to be served
Street Outreach		
Emergency Shelter		
Homeless Prevention		
Rapid Re-Housing		

2. Do you anticipate hiring additional staff with these funds? If so, please describe in detail the position and the duties to be performed.



3. Detailed explanation of how the funds will be used (If requesting funding for more than one category provide breakdown by category)



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4. Overview of how the funds will help your organization prevent, prepare for and respond to COVID-19

5. Describe any additional funding your agency has received from other sources to prevent, prepare for and respond to COVID-19