



Homeless Services Department

50-room Motel-based Shelter for Families Experiencing Homelessness Solicitation Questionnaire and Checklist

Directions: Please complete this questionnaire and checklist and submit it with your proposal for a 50-room motel-based shelter for families experiencing homelessness. We will use this information to complete a preliminary review to determine if your proposal will move forward for further consideration.

Questionnaire

1. Has your organization delivered Emergency Shelter Services to people experiencing homelessness in the past 5 years? This experience can be with any population (e.g. adults, families) and any funding source.
☐ Yes
☐ No
2. Briefly describe your organization's experience operating emergency shelter services. Please include your organization's years of experience, program type and occupancy size (e.g. congregate shelter for up to 100 individuals) and population(s) served. If you have experience delivering culturally specific emergency shelter services, please specify that here.

Checklist (please include all required documents to be considered)

- ☐ Program description and plan for service provision

- ☐ Annualized operational budget, including information on any leveraged funding to support this work
- ☐ Responses to Evaluation Questions
- ☐ This questionnaire and checklist, completed