

## Emergency Solutions Grant (ESG) Program Participant Client File Checklist

|   |  | ESG Activity             |                          |                          |                          |
|---|--|--------------------------|--------------------------|--------------------------|--------------------------|
|   |  | Street Outreach          | Shelter                  | Homeless Prevention      | Rapid Re-Housing         |
| <b>Eligibility Certification</b>  |  |                          |                          |                          |                          |
|   | <b>Staff Affidavit - Signed</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Housing Status</b><br><br>File must have <u>one</u> option selected <u>with</u> the appropriate supporting documentation |  |                          |                          |                          |                          |
|   | <b>Homeless Certification</b>  | <input type="checkbox"/> | <input type="checkbox"/> | N/A                      | <input type="checkbox"/> |
|   | <b>Homeless Self-Certification</b>   | <input type="checkbox"/> | <input type="checkbox"/> | N/A                      | <input type="checkbox"/> |
|   | <b>At Risk Certification</b>   | N/A                      | N/A                      | <input type="checkbox"/> | N/A                      |
| <b>Intake, Eligibility. &amp; Exit Documentation</b>  |  |                          |                          |                          |                          |
|   | <b>Coordinated Entry Referral</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>ESG Assessment / Screening / Intake Assessment</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>Exit Form(s)</b><br>If denied, reason documented and proof of client notification<br>If terminated, documentation of reason, notification, and opportunity to appeal<br><b>Any follow up services</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Case Management Documentation</b>  |  |                          |                          |                          |                          |
|   | <b>Housing Stability Plan</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>Case Notes &amp; Correspondence / Documentation of Services Provided</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>Referrals to Mainstream Resources</b>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Income</b>   |  |                          |                          |                          |                          |
|   | <b>Verification of Income Documentation / Zero Income Affidavits</b>   | N/A                      | N/A                      | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>Income Calculations</b>   | N/A                      | N/A                      | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b>Signed HUD Income Calculator Form</b>   | N/A                      | N/A                      | <input type="checkbox"/> | <input type="checkbox"/> |

|                    |   | Outreach | Shelter | Prevention               | Rapid Re-Housing         |
|--------------------|---|----------|---------|--------------------------|--------------------------|
| Housing Assistance | FMR & Rent Reasonableness   | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Utility Allowance Chart   | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Lead Visual Assessment - Signed   | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Habitability Inspection – Signed  | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Current W-9 for Landlord  | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Rental Assistance Agreement – Signed  | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Lease Agreement – Signed  | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Copies of payments made on behalf of clients<br>Bills; invoices; check stubs; receipts; any other supporting documentation that shows payment to third party vendor | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |
|                    | Recertification for Assistance (every 3 months)<br>Refer to ESG Policies Manual for documentation needed at recertification   | N/A      | N/A     | <input type="checkbox"/> | <input type="checkbox"/> |