Exhibit A- Scope of Work

Please edit this template to reflect your budget. All scopes of work must include needs/risk assessments for clients, populations served, assistance documents, and program participants being entered into HMIS. If there are any questions regarding these, please contact eknight@auroragov.org and/or cpatrick@auroragov.org

1. **Project Description**
   a. Please provide brief description of your program/project

2. **Staffing Cost**
   a. Provide a list of positions and brief descriptions of positions that will be funded
   b. What percentage of hours and benefits will this funding go towards
   c. Staff-to-client ratio

3. **Direct client services**
   a. What services will be provided
   b. What type of financial assistance will be provided to clients
   c. Conduct needs/risk assessments for all clients to determine goals
      i. Subrecipient is required to perform client intake, a client needs/risk assessment to determine a housing plan.
      ii. Case manager will conduct Needs/Risk Assessment and goal-setting
   d. What population of clients will you be serving
   e. Assistance Documents (if providing financial assistance to clients please include documentation that agency will be collecting.)
      i. Current Income Statements
      ii. W9 From Creditor/Landlord
      iii. Photo ID
      iv. Ledger/Eviction Notice
      v. Utilities Bill
      vi. Lease
   f. All program participants must be entered into HMIS

4. **Shelter Operational Costs**
   a. What operational costs will this funding be used for
5. **Performance Goals**
   
a. How will you measure your performance