FY 2026 HUD NOFO: PA-510 New Supportive Services Only – Standalone (SSO) Project Application

As of July 8, 2026, HUD has not released the official FY 2026 Continuum of Care (CoC) Program application forms in the e-snaps system. To allow prospective applicants sufficient time to prepare, the PA 510 Local Competition Application has been developed based on the FY 2026 CoC NOFO and the information available at the time of publication.

If HUD's final e-snaps application, instructions, or other guidance include changes that affect the information required for new project applications, the PA 510 Local Competition Application may be revised. Applicants will be notified of any required changes and provided with updated instructions, as necessary. Please be sure to answer all questions completely including all sub-items.

Project Information

1. Is your application for a New Project or a Transition Grant?

A Transition Grant is used when an agency needs one year to convert an existing HUD CoC–funded project into a different project type. If your organization does not currently receive any HUD CoC funding, check the New Project Application box.

☐New Project Application

☐Transition Grant (please complete the information below)

Current Project Type: Transition To Type **SSO**

Project Name:

2. Is the project limited to a specific population?

☐ Yes. Describe the population eligible for the project and the eligibility criteria below.

☐ No. The project is designed to serve any household that meets HUD CoC Program eligibility requirements.

If yes, provide a description of the specific population(s) and eligibility requirements of the proposed project.

Project Description

3. Describe the need for the proposed project, the gap it will address within the PA-510 homeless response system, and how it complements existing community resources. (500 characters)

4. **Describe the supportive services the project will provide, including how they will address barriers to stable housing, such as unemployment, childcare, transportation, or other challenges, and explain how these services will increase participant self-sufficiency and support successful exits from homelessness.** (1000 characters)

5. **Describe the project's strategy for providing supportive services to eligible participants, including people with unsheltered histories or who do not traditionally engage with services.** (1000 characters)

6. **Describe how the project will assess each participant's supportive service needs upon program entry and throughout project participation.** (500 characters)

7. **Describe how participants will access behavioral health and substance use treatment services. Indicate whether services are provided in-house or through referral, and explain how the project will support participants in maintaining engagement with treatment services.** (500 characters)

8. **Are substance use treatment services available on-site?**

☐Yes
☐No

If yes, indicate name of treatment provider:

9. **Explain how the project will contribute to improving the Continuum of Care's overall system performance and identify the specific outcomes the project expects to achieve.** (750 characters)

10. **Will the project have staff trained to effectively serve households experiencing medical frailty?**

☐Yes
☐No

11. **Will the project have staff trained to effectively serve households experiencing behavioral health concerns?**

☐Yes
☐No

12. Will the project have staff trained to effectively serve households experiencing substance use disorders?

☐Yes
☐No

13. Will the project prioritize seniors (age 55+)?

☐Yes
☐No

Project Budget

14. Describe the public and private resources that will supplement the project and how program participants will access resources (e.g., mainstream health, social service, employment, and income supports.) (500 characters)

15. Will the proposed project include the required 25% match from eligible sources?

☐Yes
☐No

16. Explain how the proposed budget supports the project design and demonstrates that all requested costs are eligible, necessary, reasonable, and allocable. Include how the budget aligns with the number of households and/or individuals the project expects to serve. (500 characters)

Provider Capacity

17. **Describe your organization's readiness to implement the proposed project including timeline (30/60/90/120 days from grant execution date) startup activities and staffing.** (500 characters)

18. **Describe your organization's capacity to successfully carry out the project to achieve the project's goals and objectives.** (500 characters)