

Form Title	SHP											S+C										SRO	
	New						Renewal					New					Renewal					New	
	TH	TH-RR	SAM	PH	SSO	SH	HMIS	TH	PH	SSO	SH	HMIS	TRA	SRA	PRA	PRAR	SRO	TRA	SRA	PRA	PRAR	SRO	SRO
HMIS Implementation Timetable							x																
SHP Leasing Budget																							
Leasing*	x	x	x	x		x		x	x	x	x												
Leased Structures*	x	x	x	x	x	x																	
SHP Supportive Services Budget*	x	x	x	x	x	x		x	x	x	x												
SHP Operations Budget*	x		x	x		x		x	x		x												
SHP Acquisition/Rehabilitation/New Construction Budget*	x		x	x	x	x																	
SHP HMIS Budget																							
Equipment*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Software*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Services*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Personnel*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Space & Operations*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Summary*	x		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
SHP Project Budgets																							
SHP Summary Budget	x	x	x	x	x	x	x	x	x	x	x	x											
Shelter Plus Care																							
S+C Rental Assistance Budget													x	x	x	x	x	x	x	x	x	x	
Shelter Plus Care																							
Section 8 SRO Rental Assistance Budget																							x
Estimated Development Costs																	x						x
Logic Model Attachment	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
PHA Certification Attachment																	x					x	x
Submission Summary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x