

Supportive Services for Veteran Families (SSVF) Program

Applicant Certification

Date: _____

Applicant Legal Name: _____

I hereby certify on behalf of the above named applicant organization that we meet or commit to meet the following conditions and expectations of SSVF funding:

- Adherence to evidence-based rapid re-housing practices, as reflected in the National Alliance to End Homeless' [Rapid Re-Housing Performance Benchmarks and Standards](#), which have been endorsed by the SSVF Program Office.
- Prioritization of SSVF for rapid re-housing assistance for literally homeless Veterans to the maximum extent allowed by the VA to ensure a sufficient supply of rapid re-housing assistance for every literally homeless Veteran who is eligible and chooses rapid re-housing;
- Adherence to evidence-based homelessness prevention practices, as reflected in the [SSVF Practice Standards](#).
- Active support in, or promotion of, other system-level, evidence-based practices that support achievement of the [Federal Criteria and Benchmarks for Achieving the Goal of Ending Homelessness Among Veterans](#), including, but not limited to:
 - Active participation in community planning efforts that result in measurable goals and actions to achieve and sustain an effective end to homelessness among Veterans;
 - Active participation in coordinated entry processes for homeless Veterans;
 - Data sharing and support for maintaining a comprehensive master list (i.e., "by-name") list of all homeless Veterans to track shelter and re-housing assistance for Veterans;
 - Active participation in case conferencing and other strategies to actively problem-solve situations that inhibit rapid movement to permanent housing for homeless Veterans and/or adequate provision of shelter and services while being re-housed or stabilized in housing; and
 - Where grantee's local community has not embraced the practices noted here, active promotion and leadership efforts to assist the community in pursuing these goals and practices.

Applicant SSVF Program Director/Manager:

Name

Signature

Date

Applicant CEO or Executive Director:

Name

Signature

Date