

Housing Navigation and Maintenance Program (HNMP) Allocation Acceptance Round 4										Rev. 08/19/25																																																																																																																																																																									
County Allocation (select Applicant County in row 7 below):										\$159,934																																																																																																																																																																									
Pursuant to item 2240-103-0001 of Section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.8 (commencing with Section 50811) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the support of housing navigators to help young adults 18 years and up to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults currently or formerly in the foster care system.																																																																																																																																																																																			
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Pursuant to Section 50811 of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to establish the formula allocation for the purpose of distributing these funds to counties. The formula allocation is based on each county's percentage of the total statewide number of young adults 17 through 21 years of age in the foster care and probation system. The allocation excludes Alpine and Mono counties because their calculation did not demonstrate need. The housing navigation and maintenance program for a county that accepts an allocation of money pursuant to this section shall provide training to its child welfare agency social workers and probation officers who serve nonminor dependents. The training shall address an overview of the housing resources available through the local coordinated entry system, homeless continuum of care, and county public agencies, including, but not limited to, housing navigation, permanent affordable housing, THP-Plus, and housing choice vouchers. The training shall also address how to access and receive a referral to existing housing resources, the social worker's and probation officer's role in identifying unstable housing situations for youth, and referring youth to housing assistance programs.																																																																																																																																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">Applicant County</td> <td colspan="10">Sonoma</td> </tr> <tr> <td colspan="2">Legal name of Applicant as stated on resolution:</td> <td colspan="10">County of Sonoma, Human Services Department</td> </tr> <tr> <td>Address</td> <td colspan="5">3600 Westwind Boulevard</td> <td>City</td> <td colspan="2">Santa Rosa</td> <td>State</td> <td>CA</td> <td>Zip</td> <td>95403</td> </tr> <tr> <td>Auth Rep Name</td> <td colspan="5">Angela Struckmann</td> <td>Title</td> <td colspan="2">Director of Human Services</td> <td>Auth Rep Email</td> <td colspan="2">astruckmann@schsd.org</td> <td>Phone</td> <td>707-565-5800</td> </tr> <tr> <td>Address</td> <td colspan="5">3600 Westwind Boulevard</td> <td>City</td> <td colspan="2">Santa Rosa</td> <td>State</td> <td>CA</td> <td>Zip</td> <td>95403</td> </tr> <tr> <td>Contact Name</td> <td colspan="5">Donna Broadbent</td> <td>Title</td> <td colspan="2">Human Services Division Director</td> <td>Email</td> <td colspan="2">dbroadbent@schsd.org</td> <td>Phone</td> <td>707-565-4349</td> </tr> <tr> <td>Address</td> <td colspan="5">1202 Apollo Way</td> <td>City</td> <td colspan="2">Santa Rosa</td> <td>State</td> <td>CA</td> <td>Zip</td> <td>95407</td> </tr> <tr> <td>Federal Tax ID Number (FEIN)</td> <td colspan="11">94-6000539</td> </tr> <tr> <td colspan="12">Administrative Fiscal Representative</td> </tr> <tr> <td>Contact Name</td> <td colspan="5">Amber Todahl</td> <td>Title</td> <td colspan="2">Supervising Accountant</td> <td>Contact Email</td> <td colspan="3">atodahl@schsd.org</td> </tr> <tr> <td>Phone</td> <td colspan="2">707-565-5872</td> <td>Address</td> <td colspan="3">3600 Westwind Boulevard</td> <td>City</td> <td colspan="2">Santa Rosa</td> <td>State</td> <td>CA</td> <td>Zip</td> <td>95403</td> </tr> <tr> <td>File Name:</td> <td colspan="2">App Resolution</td> <td colspan="7">Reference sample resolution document</td> <td colspan="2">Attached to email?</td> <td>No</td> </tr> <tr> <td>File Name:</td> <td colspan="2">App TIN</td> <td colspan="7">Reference Taxpayer Identification Number (TIN) document</td> <td colspan="2">Attached to email?</td> <td>Yes</td> </tr> </table>												Applicant County		Sonoma										Legal name of Applicant as stated on resolution:		County of Sonoma, Human Services Department										Address	3600 Westwind Boulevard					City	Santa Rosa		State	CA	Zip	95403	Auth Rep Name	Angela Struckmann					Title	Director of Human Services		Auth Rep Email	astruckmann@schsd.org		Phone	707-565-5800	Address	3600 Westwind Boulevard					City	Santa Rosa		State	CA	Zip	95403	Contact Name	Donna Broadbent					Title	Human Services Division Director		Email	dbroadbent@schsd.org		Phone	707-565-4349	Address	1202 Apollo Way					City	Santa Rosa		State	CA	Zip	95407	Federal Tax ID Number (FEIN)	94-6000539											Administrative Fiscal Representative												Contact Name	Amber Todahl					Title	Supervising Accountant		Contact Email	atodahl@schsd.org			Phone	707-565-5872		Address	3600 Westwind Boulevard			City	Santa Rosa		State	CA	Zip	95403	File Name:	App Resolution		Reference sample resolution document							Attached to email?		No	File Name:	App TIN		Reference Taxpayer Identification Number (TIN) document							Attached to email?		Yes
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Use of Funds																																																																																																																																																																																			
The HNMP program funds housing navigators for counties. The role of a housing navigator is to act as a housing specialist to assist young adults with their pursuits of locating available housing and overcoming barriers to locating housing. Housing navigation and maintenance activities may include, but are not limited to: 1) Assist young adults aged 18-24 years of age, inclusive, secure and maintain housing (with priority access given to young adults in the state's foster care system); 2) Provide housing case management which include essential services in emergency supports to foster youth; 3) Prevent young adults from becoming homeless; and 4) Improve coordination of serves and linkages to key resources across the community including those from within the child welfare system and the local Continuum of Care.																																																																																																																																																																																			
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Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, Suite 400, Attention: Administration and Management Division, Accounts Payable, Sacramento CA 95811 and must reference the Contract Number.																																																																																																																																																																																			

Allocation Acceptance Requirements

In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance Form, 2. GovTIN Form, and 3. Signed Resolution. If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on:

Tuesday, September 18, 2025

HCD will only accept applications electronically at the following email address:

TAY@hcd.ca.gov

Reporting Requirements

Applicant acknowledges and agrees to submit an bi-annual report to the Department for the two years following contract execution addressing the following:

Yes

- A. Number of program participants served with program funds;
- B. Itemization of use of program funds;
- C. Details on housing navigators and other subcontractors;
- D. Number of program participants served who were in the State's foster care system;
- E. Number of program participants who were homeless at time of program entry;
- F. Number of program participants who exited homelessness into temporary housing;
- G. Number of program participants who exited homelessness into permanent housing; and,
- H. Subpopulation data including:

- 1. Number of participants that are employed;
- 2. Number of participants identified as LGBTQ+;
- 3. Number of participants with a disability;
- 4. Number of participants with minor children in the household; and,
- 5. Average number of children per household.

California Public Records Act

The application, including any and all supplemental documents submitted during the review process, is a public record, which is available for public review pursuant to the California Public Records Act (CPRA) (Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code). After final awards have been issued, the Department may disclose any materials provided by the Applicant to any person making a request under the CPRA. The Department cautions Applicants to use discretion in providing information not specifically requested, including but not limited to, bank account numbers, personal phone numbers, and home addresses. By providing this information to the Department, the Applicant is waiving any claim of confidentiality and consents to the disclosure of submitted material upon request.

Certification

On behalf of the entity identified in the signature block below, I certify that:

The information, statements and attachments included in this Allocation Acceptance Form are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this Allocation Acceptance Form on behalf of the entity identified above.

In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.

Angela Struckmann

Director of Human Services



Aug 25, 2025

Authorized Rep Printed Name

Title of Authorized Rep

Signature

Date

Sonoma TAY Allocation Acceptance Form FY 25-26 Final THP_HNMP

Final Audit Report

2025-08-25

Created:	2025-08-25
By:	Victoria Gonzalez Allen (vgonzalezallen@sonomacounty-hsd.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAABVj2vJ73ujDII7UAPmyutFF3nvkTLait7

"Sonoma TAY Allocation Acceptance Form FY 25-26 Final THP_HNMP" History

-  Document created by Victoria Gonzalez Allen (vgonzalezallen@sonomacounty-hsd.gov)
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-  Document e-signed by Angela Struckmann (astruckmann@schsd.org)
Signature Date: 2025-08-25 - 3:24:41 PM GMT - Time Source: server
-  Agreement completed.
2025-08-25 - 3:24:41 PM GMT



Transitional Housing Program (THP) Allocation Acceptance Round 7										Rev. 08/19/25				
County Allocation (select Applicant County in row 7 below):										\$432,987				
Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the purpose of housing stability to help young adults 18 to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.														
Housing First														
The Contractor shall certify to employ the core components of Housing First, pursuant to Welfare and Institutions Code Section 8255 (b) as shown below: 1) Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services; 2) Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness"; 3) Acceptance of referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness; 4) Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals; 5) Participation in services or program compliance is not a condition of permanent housing tenancy; 6) Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes; 7) The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction; 8) In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents; 9) Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling; 10) Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses; and 11) The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.														
Allocation Applicant														
Allocation Applicant is a County										Yes				
Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults 18 through 20 years of age in foster care and homeless unaccompanied young adults (ages 18 through 24).														
Applicant County		Sonoma												
Legal name of Applicant as stated on resolution:				County of Sonoma, Human Services Department										
Address		3600 Westwind Boulevard			City		Santa Rosa		State		CA			
Zip		95403												
Auth Rep Name		Angela Struckmann			Title		Director of Human Services		Auth Rep Email		astruckmann@schsd.org			
Phone		707-565-5800												
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Zip		95403												
Contact Name		Donna Broadbent			Title		Human Services Division Director		Email		dbroadbent@schsd.org			
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Address		1202 Apollo Way			City		Santa Rosa		State		CA			
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Administrative Fiscal Representative														
Contact Name		Amber Todahl			Title		Supervising Accountant		Contact Email		atodahl@schsd.org			
Phone		707-565-5872												
Address		3600 Westwind Boulevard			City		Santa Rosa		State		CA			
Zip		95403												
File Name:		App Resolution			Reference sample resolution document						Attached to email?		No	
File Name:		App GovTIN Form			Reference Taxpayer Identification Number (TIN) document						Attached to email?		Yes	
Use of Funds														
Funds shall be used to help young adults who are 18 to 24 years of age, inclusive, secure and maintain housing with priority given to young adults formerly in the state's foster care or probation systems. Use of funds may include, but are not limited to: 1) Identify and assist housing services for this population in your community; 2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system); 3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and 4) Provide engagement in outreach and targeting to serve those with the most severe needs.														
Expenditure of Funds														
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, Suite 400, Attention: Administration and Management Division, Accounts Payable, Sacramento CA 95811 and must reference the Contract Number.														
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Reporting Requirements														

Applicant acknowledges and agrees to submit an bi-annual report to the Department for the two years following contract execution addressing the following: A. Number of program participants served who were homeless at time of program entry; B. Number of program participants served who were in the State's foster care system; C. Number of program participants served who were formerly in the State's foster care or probation systems; D. Number of program participants who exited homelessness into temporary housing; E. Number of program participants who exited homelessness into permanent housing; F. Itemization on use of program fund expenditures; G. Who were the housing navigators or other subcontractor(s)? H. Subpopulation data including: 1. Number of participants that are employed; 2. Number of participants identified as LGBTQ+; 3. Number of participants having a disability; 4. Number of participants with minor children in the household; and, 5. Average number of children per household.	Yes
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California Public Records Act

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Certification

On behalf of the entity identified in the signature block below, I certify that:

The information, statements and attachments included in this Allocation Acceptance Form are, to the best of my knowledge and belief, true and correct.

I possess the legal authority to submit this Allocation Acceptance Form on behalf of the entity identified above.

In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.

Angela Struckmann	Director of Human Services		Aug 25, 2025
Authorized Rep Printed Name	Title of Authorized Rep	Signature	Date

Sonoma TAY Allocation Acceptance Form FY 25-26 Final THP R7_HNMP

Final Audit Report

2025-08-25

Created:	2025-08-25
By:	Victoria Gonzalez Allen (vgonzalezallen@sonomacounty-hsd.gov)
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"Sonoma TAY Allocation Acceptance Form FY 25-26 Final THP R7_HNMP" History

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