



**STATE OF MISSOURI
MISSOURI DEPARTMENT OF CORRECTIONS
CONTRACT AMENDMENT**

**RETURN AMENDMENT NO LATER THAN JUNE 03, 2016 TO:
DIANA FREDRICK, CPPB
PROCUREMENT OFFICER II**

MISSOURI DEPARTMENT OF CORRECTIONS
PURCHASING SECTION
2729 PLAZA DRIVE, P.O. BOX 236
JEFFERSON CITY, MISSOURI 65102
FAX: 573-522-1562

DATE	VENDOR IDENTIFICATION	CONTRACT NUMBER	CONTRACT DESCRIPTION
05/06/16	Catholic Charities of Southern Missouri, Inc. 424 E. Monastery Street Springfield, MO 65807	SDA48000819 Amendment #001	COMMUNITY REENTRY FUNDING

THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:

Pursuant to paragraph 2.2.3 on page 7, the Missouri Department of Corrections hereby exercises its option to renew the above-referenced contract for the period of July 1, 2016 through June 30, 2017.

Renewal of the above contract is contingent upon final approval of the fiscal year 2017 budget by Governor Nixon.

All terms, conditions and provisions of the previous contract period, including awarded funds, shall remain and apply hereto.

The contractor shall complete, sign and return this document as acceptance on or before the date indicated above.

IN WITNESS THEREOF, THE PARTIES HERETO EXECUTE THIS AGREEMENT.

Authorized Signer's Printed Name and Title: MARISA TAYLOR EXECUTIVE DIRECTOR
 Authorized Signature: [Signature] Date: 5/19/16

THIS AMENDMENT IS ACCEPTED BY THE MISSOURI DEPARTMENT OF CORRECTIONS AS FOLLOWS: In its entirety.

[Signature] 6-2-16
 Ellis McSwain, Jr., Board of Probation and Parole Chairman Date

REQUEST FOR APPLICATION

**Missouri Department of Corrections
Fiscal Management Unit
Purchasing Section
2729 Plaza Drive, P.O. Box 236
Jefferson City, MO 65102**

**Buyer of Record:
Gary Stoll, CPPB
Telephone: (573) 526-6402
gary.stoll@doc.mo.gov**

RFA SDA480-008

Community Reentry Funding Statewide

**Contract Period: Date of Award through
06/30/2016**

Date of Issue: June 15, 2015

Page 1 of 57

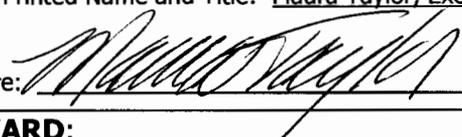
**Applications Must Be Received No Later
Than:**

2:00 p.m., July 2, 2015

Sealed applications must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The applicant should clearly identify the RFA number on the lower right or left-handed corner of the container in which the application is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding agreement, as defined herein, shall exist. The authorized signer of this document certifies that the awardee (named below) and each of its principals are not suspended or debarred by the federal government.

Program Title: Reentry Housing Assistance Program
 Company Name: Catholic Charities of Southern Missouri, Inc.
 Mailing Address: 424 E Monastery Street
 City, State, Zip: Springfield Missouri 65807
 Telephone: 417.720.4213 Fax: 417.720.4216
 Federal EIN #: 80-0455890 State Vendor #: 8004558900 0
 Email: mtaylor@ccsomo.org
 Authorized Signer's Printed Name and Title: Maura Taylor, Executive Director

Authorized Signature:  Application Date: 6/30/2015

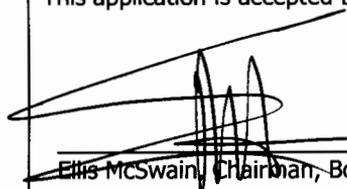
NOTICE OF AWARD:

This application is accepted by the Missouri Department of Corrections as follows:

In its entirety.

Contract No. **SDA48000819** SE-003

Date: 7/29/15


Ellis McSwain, Chairman, Board of Probation and Parole

The original cover page, including amendments, should be signed and returned with the application.

Original

REQUEST FOR APPLICATION

**Missouri Department of Corrections
Fiscal Management Unit
Purchasing Section
2729 Plaza Drive, P.O. Box 236
Jefferson City, MO 65102**

**Buyer of Record:
Gary Stoll, CPPB
Telephone: (573) 526-6402
gary.stoll@doc.mo.gov**

RFA SDA480-008

Community Reentry Funding Statewide

**Contract Period: Date of Award through
06/30/2016**

Date of Issue: June 15, 2015

Page 1 of 57

**Applications Must Be Received No Later
Than:**

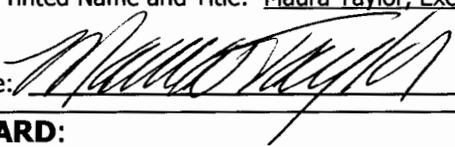
2:00 p.m., July 2, 2015

Sealed applications must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The applicant should clearly identify the RFA number on the lower right or left-handed corner of the container in which the application is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding agreement, as defined herein, shall exist. The authorized signer of this document certifies that the awardee (named below) and each of its principals are not suspended or debarred by the federal government.

Program Title: Reentry Housing Assistance Program
Company Name: Catholic Charities of Southern Missouri, Inc.
Mailing Address: 424 E Monastery Street
City, State, Zip: Springfield Missouri 65807
Telephone: 417.720.4213 Fax: 417.720.4216
Federal EIN #: 80-0455890 State Vendor #: 8004558900 0
Email: mtaylor@ccsomo.org

Authorized Signer's Printed Name and Title: Maura Taylor, Executive Director

Authorized Signature:  Application Date: 6/30/2015

NOTICE OF AWARD:

This application is accepted by the Missouri Department of Corrections as follows:

Contract No. _____

Ellis McSwain, Chairman, Board of Probation and Parole

Date

The original cover page, including amendments, should be signed and returned with the application.

Application Summary Form

COMMUNITY REENTRY FUND APPLICATION SUMMARY FORM

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY AND SUBMITTED TO BE CONSIDERED FOR AWARD.

<i>Please select geographic area in accordance with the map attached: See Attachment 1</i>		Amount of DOC Funds Requested:
<input type="checkbox"/> Western Region	City/County _____	\$ 50,000
<input type="checkbox"/> Southwest Region	City/County _____	
<input type="checkbox"/> North Central Region	City/County _____	
<input type="checkbox"/> Eastern Region	City/County _____	
<input checked="" type="checkbox"/> Southeast Region	City/County Cape Girardeau, Cape County	

Program Title: Reentry Housing Assistance Program

Does this program complement another application? Yes No **Name:** Community Caring Council/Cape

Provide a unique name descriptive of service or program for EACH application submitted

Applicant Agency and Address:

Catholic Charities of Southern Missouri
424 E Monastery Street
Springfield Missouri 65807

Maura Taylor 6-30-15
Signature/Title Date
Executive Director

Project Director Name, Phone, Fax & Email:

Kyle Schott
573.335.0134
573.335.0343
kschott@ccsomo.org

Anticipated Outputs: (number of offenders supervised by DOC to be served by the proposed project): 18

Estimated Cost per Offender:
\$ 2,778.00

of Paid Staff: 4
of Volunteers: 0

Summary of Proposed Project: In a concise manner, provide a summary paragraph of your project.

Catholic Charities of Southern Missouri (CCSOMO) Reentry Housing Assistance Program will provide housing stability case management & services, financial assistance for rent & rent deposits, and referrals for other criminogenic needs for 18 high risk offenders under the supervision of Probation & Parole in the Cape Girardeau community & surrounding areas. Goals are for client to attain & retain permanent housing, increase household income by gainful employment or accessing state and/or federal benefits, referrals for other needed services that will assist the offender in achieving self-sufficiency (Service Supported Housing Model). Sex offenders are eligible for program. Reentry clients may also have access to CCSOMO's other housing programs including homeless prevention (ESG) & SSVF (Veteran) programs based on eligibility guidelines.

In-Kind Contributions: Applicant must identify all in-kind contributions which include "contributions other than cash." While these contributions usually add real value to a project, they do not require an additional cash outlay (e.g. donated labor, materials and services).

Applicants must provide in-kind and identify in-kind contributions their organizations will make to this project and how those contributions will help sustain the project. The funding resulting from an award of the RFA shall be considered seed funding to start initiatives with a strong sustainability plan indicated.

Attach a page identifying in-kind contributions.

In-Kind Contribution Total: \$37,878 (see attached)

Catholic Charities of Southern Missouri In-kind Donations**Staffing costs**

- Karen Auner, Case Manager benefit package costs based on 17 hours/week \$5,460
- Brenda Miller, Case Manager average 8 hours/week and benefits \$8,800
- Tyree Chapman-Administrative Assistant-Cape Girardeau-6 hours/week \$6,450
- Kyle Schott,LPC & Program Director-4 hours supervision, mental health review \$6,600

Cape Girardeau Program Costs for Reentry Housing Assistance Program

- Rent/Utilities/Land-line/Internet allocated based on program staffing \$2,400
- Computer Monitoring, Software, Equipment at 1FTE \$1,050
- Cell phone at 25/hrs week based on Karen and Brenda estimated hours \$300
- Mileage-300/month at CCSOMO cost of \$.505/mile to meet with clients,
parole officers. landlords and referral agencies \$1,818
- Business supplies-1FTE at \$30/month for 12 months \$360
- Annual Audit and A133-.0125 of 30,000 \$375

Indirect Costs for Accounting, HR, Legal, Supervision at 10% of salaries/benefits

- \$42,650 salary & CCSOMO benefits for Reentry Housing Assistance Program \$4,265

Total In-Kind Donation provided by CCSOMO**\$37,878**

Checklist for Application Submission**REQUIRED FORM
COMPLETED FORM TO BE RETURNED
WITH APPLICATION**

Check that all forms and narratives are complete and accurate. Submit the application narrative and forms in the following order to ensure credit for each of the categories as listed below.

NOTE: If narrative is not clearly marked by section, the evaluation team may not score the application.

1. **Request for Application Cover Page, including Cover Page(s) for any amendments** (see cover sheet)
2. **Checklist for Application Submission**
3. **Application Narrative** Not to exceed 10 pages. (see Part Three – Submission Requirements)
4. **Preference Points** (see 3.1 g)
 - Is service supported housing proposed? Yes No
 - Are sex offenders to receive rent/housing subsidy? Yes No
5. **Funding Sources** The applicant should identify on the Checklist for Application Submission the percentage of the applicant's total operating revenues which came from the following sources during the last fiscal year. (Total should equal 100%)

0 % Local government
 11 % State government
 18 % Federal government
 6 % Direct donations from individuals
 32 % Corporate or foundation grants
 10 % Fee and charges for services, products, and sales
 0 % Endowment and interest income
 19 % Fundraisers or special events
 0 % Membership fees
 4 % Other sources (specify: In-Kind donations)
100% Total

6. X Supporting Documentation & Forms

- A. Exhibit A – Prior Experience of Applicant (mandatory form)
- B. Exhibit B – Expertise of Personnel (mandatory form)
- C. Exhibit C – Legal/Cancellation Actions Against Applicant (mandatory form)
- D. Exhibit D – Performance Measures (mandatory form)
- E. Exhibit E – Timeline (mandatory form)
- F. Exhibit F – Budget Detail Worksheet (mandatory form)
- G. Exhibit G – Budget Narrative (mandatory form)
- H. Exhibit H – Missouri Service-Disabled Veteran Business Preference (optional form)
- I. Exhibit I – Participation Commitment (optional form)
- J. Exhibit J – Documentation of Intent to Participate for MBE/WBE (optional form)
- K. Documentation of Nonprofit Corporation under Chapter 355 RSMo. or Section 501(C)(3) of the Internal Revenue Code (documentation needed)

NOTE: Questions relating to the RFA must be directed to Gary Stoll, of the Department of Corrections at either (573) 526-6402 or gary.stoll@doc.mo.gov.

Reentry Housing Assistance Program Catholic Charities of Southern Missouri, Inc. Proposal

Catholic Charities of Southern Missouri (CCSOMO) is providing social services throughout the 39 southernmost counties in Missouri. In the southeast region, including Cape Girardeau and the surrounding counties, CCSOMO is providing homeless prevention services, housing stability case management, and supportive services for veteran families. The CCSOMO Family Strengthening Coordinators (Case Managers) work with homeless or those at-risk of homelessness to obtain and retain permanent housing and to assist them in locating resources and services that lead to self-sufficiency and housing stability. CCSOMO has received funding from Missouri Housing Development Commission for the past three years under the Emergency Solutions Grant (ESG) to provide the homeless prevention services in Cape, Scott, Mississippi and Carter counties in the southeast probation and parole district. CCSOMO was awarded the SSVF (Supportive Services for Veteran Families) grant on October 1, 2014 from the Veterans Administration to provide housing stability case management and comprehensive services to homeless and those at imminent risk of homeless veteran families in 36 counties in southern Missouri. Many of the clients CCSOMO is currently assisting under these grants have criminal backgrounds and/or are on probation and CCSOMO case managers are experienced working with them and landlords to help them obtain and retain permanent housing. In addition, CCSOMO has a contract with the state of Missouri to provide Alternatives to Abortion case management for low-income households facing unplanned pregnancies and in need of assistance. Reentry Housing Assistance Program clients may also benefit from having access to other CCSOMO housing programs and supportive services, depending on program eligibility requirements.

Question 1: CCSOMO will adapt our current housing assistance programs operating under ESG and SSVF grants to provide housing assistance and housing stability case management for offenders who are currently supervised by the Missouri Board of Probation and Parole and reentering the Cape Girardeau community and surrounding areas. By providing housing assistance, mental health assessments and housing stability case

management (including referrals for employment, substance abuse, academic or vocational training, and basic and emergency needs), CCSOMO's program would be providing evidence-based services that assist offenders in becoming law abiding citizens. According to research, an offender has a greater chance for success if employed, sober, living in stable environment and moving towards self-sufficiency.

Under the Reentry Housing Assistance Program that CCSOMO will implement, if funded, the agency will provide University of Missouri with all appropriate fiscal and program records for monitoring. The current CCSOMO Housing Assistance Programs Policies and Procedures, forms, and screening tools will be modified to meet grant and reporting requirements under the RFA SDA480-008 grant.

The agency will meet all record maintenance and audit requirements listed in 2.1.6 and 2.1.7. CCSOMO has an audit completed by BKD each year and for 2015 fiscal year ending June 30, 2015 an A-133 will be included. CCSOMO will meet all established guidelines and reporting dates for quarterly reports and submission of tracking sheets to University of Missouri as outlined in section 2.1.5. The tracking sheet requires detailed tracking of each individual served by the award, including: client name, department number, birth date, employment status, and units of service provided by category. CCSOMO will incorporate these tracking requirements into the intake, screening and case management documentation, as well as the CCSOMO data base and housing assistance software.

CCSOMO will make referrals to appropriate community partners and social service agencies for additional offender needs. The Community Caring Council's reentry assistance program which is designed to provide emergency, basic needs and transportation complements CCSOMO's Housing Assistance Program. Both agencies will work closely to ensure that the reentry client is accessing needed resources and services. CCSOMO estimates that the Reentry Housing Assistance Program will provide housing stability case management, rent deposits, and up to three months for approximately 18 offenders who qualify for the housing assistance program.

Question 2. CCSOMO will modify the agency's current Housing Assistance Program Policies, Procedures, screening and assessment tools to focus on the evidence-based practice principles in Community Corrections

so that CCSOMO targets case management and resources to high-risk offenders who are currently supervised by Missouri Probation and Parole. Screening and assessment tools will focus on dynamic and static risk factors and profile criminogenic needs such as criminal personality; antisocial attitudes, values, and beliefs; low self-control; criminal peers; substance abuse; and dysfunctional family. CCSOMO case manager will consult with the Probation and Parole Officer assigned to the offender. Offenders reentering the community usually have difficulty finding housing and the case manager works with them to address these risks factors to increase housing options, achieve self-sufficiency, and reduce recidivism.

The case managers and staff providing reentry housing assistance are trained in motivational interviewing. (Karen Auner -2014 and Kyle Schott-2008) Trauma informed care webinar was attended by all SSVF case managers in December 2014. These skills allow case managers to more effectively enhance motivation for initiating and maintaining change behavior. CCSOMO plans to host additional training and refresher courses on both motivational interviewing and trauma informed care for all case managers.

The screening tool and assessment is designed to prioritize resources and case management to offenders who are higher risk and have additional barriers to access housing and needed services such as mental health, substance abuse treatment, employment and vocational services as well as basic and emergency needs. The CCSOMO case manager will assess the needs and will work with the client to access critical services by referring to the appropriate agencies. CCSOMO plans to assist up to 18 individuals in need of adequate housing through our Reentry Housing Assistance Program. It is the goal that 50% will maintain permanent housing. That goal is defined as maintaining housing up to two months after monetary assistance has ceased while maintaining rent and utility payments in a timely manner. A minimum of 10% of individuals enrolled in this program will be sexual offenders. It is anticipated that this program will assist in the following areas:

- **Rental Assistance:** CCSOMO will assist with rental deposit and up to three months' rent at an average rent of \$500/Mo totaling an overall assistance average of \$2000 maximum per client. Expect rental assistance will fall with HUDs Fair Market rent and guidelines

- **Employment:** CCSOMO case manager will assist client in working with agencies specializing in employment or education services. These agencies include the Missouri Career Center, Vocational Rehabilitation, Mers/Goodwill, Alternative Opportunities, and Community Counseling Center (for individuals with a mental illness). A possible conduit for education will be the Cape Vocational/Technical School.
- **Basic Needs:** It is anticipated that any client requiring housing assistance will also be in need of assistance with basic needs. Therefore CCSOMO has collaborated on this grant with the Community Caring Council who will be assisting in the areas of basic needs and transportation.
- **Mental Health/Substance Abuse:** Due to the fact that CCSOMO has a Licensed Professional Counselor on staff, the case manager may refer the client internally for an evaluation for mental health or substance abuse needs. The case manager will refer and coordinate services with Community Counseling Center (mental health), New Visions (sexual offenders), Gibson Recovery Center (substance abuse), or Family Counseling Center (substance abuse for women) as appropriate.

CCSOMO case managers will continue to provide follow-up to make sure client has connected and is receiving services from the referral agency. This service supported housing model provides housing stability case management, referrals and wrap-around services that increase self-sufficiency and reduce recidivism.

Question 3. The offender's criminal history and risk factors will determine the amount of contact the case manager will have on a weekly basis and the amount of time it takes to secure housing and access needed services. Certain housing options are not available to clients who have a criminal history including sexual offenses, manufacturing and selling drugs, etc., requiring the case manager to identify landlords who will lease to these higher risk offenders. Case manager will assist the client in the housing search and work with the landlords to secure a lease. Most of the high risk offenders will have other barriers (risk factors) to retaining housing and achieving self-sufficiency. The number of referrals for additional services will be dependent on the criminogenic needs of the offender. CCSOMO anticipates that some of the major barriers that will require

extensive housing stability case management and referrals will be: lack of employment, mental health issue, need for substance abuse and anger management treatment, and marital problems. CCSOMO has implemented a new software system called CaseWorthy that will allow measurements of outputs, such as number of referrals and also outcomes such self-sufficiency measures such as increasing household income, gaining employment and maintaining rent/utility payments. Measurement of outcomes allows CCSOMO to assess the effectiveness of the program and case managers and identify changes that need to be made as part of the Performance Quality Improvement Plan.

Question 4. The target audience who will receive services are offenders under the supervision of Probation and Parole and who are at higher risk to re-offend based on criminogenic needs determined during the interview and screening process. Since up to 18 offenders are expected to be served with housing assistance and case management, CCSOMO will prioritize services and access to resources based on the risk principle of providing more assistance and resources to higher risk offenders. Referrals to community partners for additional resources, including basic needs, employment, health care, etc., will be based on grant requirements, housing stability plans and offender needs.

.CCSOMO will continue outreach to community organizations; strengthen the relationship with Probation and Parole and work with regional Community Supervision Centers in the southeast region to identify offenders who are in need of housing or those that may become homeless. CCSOMO case managers will work with Probation and Parole Officers to identify barriers to self-sufficiency with each offender referred to the program. This Service Supported Housing Program will provide the case management services and referrals mentioned previously, including assisting clients in gaining reinstatement or application of state and and/or federal benefits. The housing stability case management and supportive services received by reentry offender will increase the likelihood of the offender retaining housing, gaining employment and reducing recidivism.

3.1.2 Preference Points

- a. CCSOMO's Reentry Housing Assistance Program will be service supported housing with case management and referrals that deliver wrap-around services which provide the offenders with the

opportunity to work towards self-sufficiency. CCSOMO will work with Probation and Parole to identify barriers with each offender.

- b. CCOSMO will provide sex offender service supported housing; we estimate at least 10% of the clients receiving supported housing services will be sex offenders.
- c. Trauma Informed Care is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. SSVF staff including Karen Auner has received training on this framework and are incorporating it into their case management process.
- d. CCSOMO case managers will refer clients to employment services and monitor their progress.

3.1.3 Applicant's Experience Expertise:

- a. Karen Auner has worked with the following federal employees in her past position and as a CCSOMO Supportive Services for Veteran Families (SSVF) case manager.

Kathy Hollenbeck
USPO
Federal Building
555 Independence
Cape Girardeau, MO 63703
(573) 331-8966
khollenbeck@moep.uscourts.gov

Kim Bramlett
USPO
Federal Building
555 Independence
Cape Girardeau, MO 63703
(573) 331-8964
kbramlett@moep.uscourts.gov

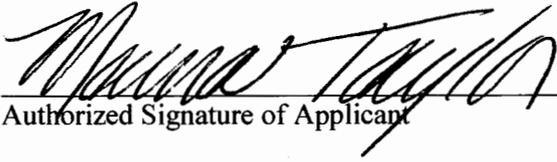
Kim and Kathy are the veterans' PO.

- b.-f. Information contained in Exhibits A, B, C and the narrative.

EXHIBIT A**SUBMISSION IS MANDATORY****PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Missouri Housing Development Commission
Address of Reference Company:	3435 Broadway
	Kansas City, MO 64111
Reference Contact Person Name:	Julie Smith
Contact Person Phone #:	816-759-6600
Contact Person e-mail address:	jsmith@mhdc.com
Dates of Prior Services:	March 2013 – Present
Dollar Value of Prior Services:	FY 2013: \$222,915; FY 2014 \$242,889 (ESG) and \$223,700 (MHTF); FY 2015: \$313,299 (ESG) and \$190,069 (MHTF)
Description of Prior Services Performed:	<p>Emergency Solutions Grants – Homelessness Prevention: housing assistance to low-income residents of Jasper, Newton, Christian, Greene, Webster, Carter, Shannon, Scott, Mississippi, and Cape Girardeau Counties.</p> <p>MHTF Rental Assistance: assistance to low-income Missourians in 35 southern counties (2015).</p> <p>MHTF Home Repair/Rebuild: assistance to low-income homeowners in southern Missouri (2014/15).</p> <p>Operating Funds: to support LifeHouse Crisis Maternity Home and Home Repair/Rebuild operating needs (2014).</p>



 Authorized Signature of Applicant



 Date

EXHIBIT A**SUBMISSION IS MANDATORY****PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	John J Pershing VA Medical Center
Address of Reference Company:	1500 N Westwood Blvd
	Poplar Bluff, MO 63901
Reference Contact Person Name:	Craig Barwick
Contact Person Phone #:	573-778-4458
Contact Person e-mail address:	craig.barwick@va.gov
Dates of Prior Services:	October 2014 – Present
Dollar Value of Prior Services:	FY 2015: \$620,238
Description of Prior Services Performed:	Local VA partner for the Supportive Services for Veteran Families project in providing both Homelessness Prevention and Rapid Rehousing services



 Authorized Signature of Applicant



 Date

EXHIBIT A**SUBMISSION IS MANDATORY****PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Department of Mental Health Division of Developmental Disabilities Sikeston Regional Office
Address of Reference Company:	112 Plaza Dr P.O. Box 966
	Sikeston, MO 63801
Reference Contact Person Name:	Lisa Williamson
Contact Person Phone #:	573-472-5300
Contact Person e-mail address:	<u>Lisa.Williamson@dmh.mo.gov</u>
Dates of Prior Services:	April 2013 – Present
Dollar Value of Prior Services:	FY 2015: \$892,822.65
Description of Prior Services Performed:	Support coordination for individuals with developmental disabilities in Scott and Cape Girardeau Counties


Authorized Signature of Applicant


Date

EXHIBIT A

SUBMISSION IS MANDATORY

PRIOR EXPERIENCE OF APPLICANT

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	State of Missouri
Address of Reference Company:	P.O. Box 809
	Jefferson City, MO 65102
Reference Contact Person Name:	Emily Kraft
Contact Person Phone #:	573-751-8502
Contact Person e-mail address:	<u>Emily.Kraft@oa.mo.gov</u>
Dates of Prior Services:	July 2012 – Present
Dollar Value of Prior Services:	FY 2012: \$36,363.81; FY 2013: \$40,269.26; FY 2014: \$52,980.86; FY 2015 \$27,556.46
Description of Prior Services Performed:	Alternatives to Abortion Program: pregnancy and parenting support to anyone facing an unplanned pregnancy and residing within Bollinger, Butler, Cape Girardeau, Carter, Douglas, Dunklin, Iron, Madison, Mississippi, New Madrid, Pemiscot, Reynolds, Ripley, Scott, Shannon, Stoddard, Texas, Wayne and Wright Counties.



 Authorized Signature of Applicant

6-30-15
 Date

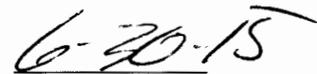
EXHIBIT A**SUBMISSION IS MANDATORY****PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	City of Cape Girardeau
Address of Reference Company:	401 Independence
	Cape Girardeau, MO 63701
Reference Contact Person Name:	Steve Williams
Contact Person Phone #:	573-339-6300
Contact Person e-mail address:	swilliams@cityofcapegirardeau.org
Dates of Prior Services:	April 2014 – Present
Dollar Value of Prior Services:	\$50,000
Description of Prior Services Performed:	Subcontract under the city of Cape Girardeau to manage Emergency Solutions Grant – Homeless Prevention Program for Cape County.



 Authorized Signature of Applicant

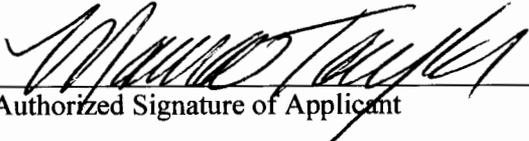


 Date

EXHIBIT A**SUBMISSION IS MANDATORY****PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Organization Name:	Catholic Charities of Southern Missouri
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Community Caring Council Cape Girardeau
Address of Reference Company:	937 Broadway
	Cape Girardeau, MO 63701
Reference Contact Person Name:	Tom Davisson
Contact Person Phone #:	573-651-3747
Contact Person e-mail address:	daviggf@hotmail.com
Dates of Prior Services:	April 2014 – Present
Dollar Value of Prior Services:	N/A
Description of Prior Services Performed:	Work together on providing area services as well as partner on MHDC grant providing homeless prevention program for Cape Girardeau County.


 Authorized Signature of Applicant


 Date

EXHIBIT B
SUBMISSION IS MANDATORY

EXPERTISE OF PERSONNEL

(Copy and complete this table for each key person proposed)

Title of Position: <u>Case Manager</u>	
Name of Person:	Karen Auner
Educational Degree (s): include college or university, major, and dates	B.S. in Business Administration, Southeast Missouri State University, 1986.
License(s)/Certification(s), Number(s), expiration date(s), if applicable:	N/A
Specialized Training Completed. Include dates and documentation of completion for all required training identified in this document:	N/A
Number of years experience in area of service proposed to provide. Experience in working with offenders?	3½ years experience working with offenders in Federal re-entry program
Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.	6 months
Describe this person's responsibilities over the past 12 months.	Case Manager for Supportive Services for Veteran Families, housing homeless veterans, helping them access other community services.
Previous employer(s), positions, and dates.	Southeast Missouri Behavioral Health, 2011-2013 Case Manager in Federal Re-entry Program; 2013-2014 Director of Federal Re-entry Program. East Missouri Action Agency, 2004-2010 Case Manager in employment program, worked with people on Temporary Assistance.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Social Work	10 years Case Management experience
✓ Reentry	Worked with offenders re-entering community from federal prison through assistance with gaining employment, finding housing, and learning transitional skills to aid in re-entering society as a productive member. Worked directly with offenders as well as training and supervising staff. Also worked closely with Regional Re-entry Manager for the Federal Bureau of Prisons as well as Federal Probation Officers.
✓ Counseling	
✓ Criminal Justice	

Title of Position: <u>Case Manager</u>	
✓ Correctional Residential Facilities	Worked with correctional facilities in offenders' release from the institution to re-entry center 2011-2014



Authorized Signature of Applicant



Date

EXHIBIT B
SUBMISSION IS MANDATORY

EXPERTISE OF PERSONNEL

(Copy and complete this table for each key person proposed)

Title of Position: <u>Case Manager</u>	
Name of Person:	Brenda Miller
Educational Degree (s): include college or university, major, and dates	B.S. in Social Work, Southeast Missouri State University, 1982
License(s)/Certification(s), Number(s), expiration date(s), if applicable:	N/A
Specialized Training Completed. Include dates and documentation of completion for all required training identified in this document:	BSW with 33 years of experience in social work. Managing the homeless prevention program for Scott/Mississippi Counties since April 2014 and for Cape Girardeau County since April 2014.
Number of years experience in area of service proposed to provide. Experience in working with offenders?	Since 2013 case managing a homeless prevention program with a number of participants that have been on probation or previously incarcerated.
Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.	Employed with CCSOMO for 2 years and 2 months.
Describe this person's responsibilities over the past 12 months.	Case management of the Emergency Solutions Grant – Homeless Prevention, assisting participants to remain housed; providing financial assistance and referrals to other agencies for needs that are not provided with the program.
Previous employer(s), positions, and dates.	State of Missouri, 1982-2013 Division of Family Services, Case Manager/Children's Division. Case Manager/Adoption Specialist.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Social Work	1982-2006 Missouri Department of Social Services: determine eligibility for state assistance programs; 2006-2007 Case management with families whose children were in or at risk of children being placed in State custody; 2007-2013 Adoption Specialist; 2013-present Case Management of Homeless Prevention Program.
✓ Reentry	
✓ Counseling	
✓ Criminal Justice	
✓ Correctional Residential Facilities	

Maureen Taylor
Authorized Signature of Applicant

6-30-15
Date

EXHIBIT B
SUBMISSION IS MANDATORY

EXPERTISE OF PERSONNEL

(Copy and complete this table for each key person proposed)

Title of Position: <u>Program Director</u>	
Name of Person:	Kyle Schott
Educational Degree (s): include college or university, major, and dates	M.A. Counseling Psychology, Southeast Missouri State University, 1994-1997 B.S. Economics/Minor in Psychology, Southeast Missouri State University; 1985-1989
License(s)/Certification(s), Number(s), expiration date(s), if applicable:	Licensed Professional Counselor, June 2017 Certified Co-occurring Disorders Professional – Diplomate
Specialized Training Completed. Include dates and documentation of completion for all required training identified in this document:	Licensed Professional Counselor since 1999 available to provide mental health evaluations and referrals to appropriate services for individuals seeking housing assistance whose mental health needs may interfere with successful housing retention.
Number of years experience in area of service proposed to provide. Experience in working with offenders?	28 years of mental health experience. During this time provided mental health services to many offenders. Also contracted with a private probation service to provide financial management services to individuals on probation for writing bad checks.
Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.	Employee with agency since September 2010; 4 years and 9 months.
Describe this person's responsibilities over the past 12 months.	Regional Director responsible for program management for a variety of programs for the eastern region of the Springfield/Cape Girardeau Catholic Diocese. Also continue to provide mental health services to individuals and families in the area.
Previous employer(s), positions, and dates.	Community Counseling Center, Counselor: 2007-2010 Bootheel Counseling Services, Counselor/Case Manager: 1993-2007
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Social Work	Case management services for individuals with severe and chronic mental illness: 1993-1999
✓ Reentry	Serve on local MRP team 2014-2015
✓ Counseling	Licensed Professional Counselor since 1999
✓ Criminal Justice	Previous contract to provide financial management to individuals on probation for writing bad checks: 2004-2007
✓ Correctional Residential Facilities	Provided counseling to employees through EAP of Southeast Correctional Center 1999-2007

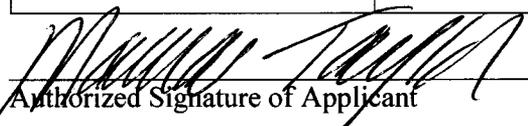

Authorized Signature of Applicant


Date

EXHIBIT C**SUBMISSION IS MANDATORY****LEGAL/CANCELLATION ACTIONS AGAINST APPLICANT**

The applicant shall copy and complete this form for each legal action or cancellation of contract brought against the organization in the past 5 years. In addition, the applicant is advised that if such information is obtained by Department that is not included in the application, the application may not be considered.

Organization Name:	Catholic Charities of Southern Missouri, Inc.
Legal/Cancellation Actions Information From:	
Name of Company:	Catholic Charities of Southern Missouri, Inc.
Address of Company:	424 E Monastery St
	Springfield, MO 65807
Contact Person Name:	Maura Taylor
Contact Person Phone Number:	417-720-4213
Contact Person e-mail address:	mtaylor@ccsomo.org
Date(s) of Legal Action or Cancellation:	N/A
Reason for Cancellation of Contract:	N/A
Description of Legal Action:	N/A
Resolution of Legal Action:	N/A


 Authorized Signature of Applicant

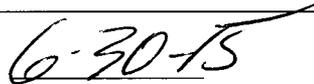

 Date

Exhibit D
Performance Measures

Instructions for how to complete this form and a sample can be found the next page.

Total Number of Clients Agency Proposes to Serve: 18

Category	Service	Proposed Clients	Outcome	Indicator (How do you know you are achieving the outcome?)
Academic	Referrals to local community college	As needed	Enhanced education	Additional education and employment opportunities as discovered through case management
Basic Needs and Emergency Services	Referrals to Community Caring Council for needs	18	Attainment of basic needs and emergency services	Community Caring Council provides basic needs and emergency services to CCSOMO referred housing clients in achieving housing stability and self-sufficiency. Services provided will allow clients to obtain housing such as identifying documentation, birth certificates, households goods
Employment	Referrals to Missouri Career Center, Mers/Goodwill, Community Counseling Center	Majority of clients will be referred for some type of employment services	Improved employment	Monitor clients' progress towards gainful employment, developing soft skills through comprehensive case management
Family	Refer to Community Caring Council for families needing parenting classes	As needed	Increased family support	Monitoring class enrollments through case management and coordination with Community Caring Council to improve family dynamics
Housing	Housing stability case management, including rent/rental deposit assistance	18	Attainment of housing	50% of clients will maintain permanent housing up to two months after monetary assistance has ceased while maintaining rent and utility payments in a timely manner
Mental Health	Referral for CCSOMO mental health evaluations and counseling	Up to 18 offenders could be served by CCSOMO	Reduced mental health risks	Participation in mental health counseling and treatment, which can reduce the mental risks that lead to loss of housing or serve as barriers to gainful employment

	External referrals to Community Counseling Center (mental health), New Visions (sexual offenders), Gibson Recovery Center (substance abuse), or Family Counseling Center (substance abuse for women)			
Substance Abuse	Referrals to Gibson Recovery Center or Family Counseling Center for treatment	As needed	Reduced substance abuse	Participation in treatment that reduces risks to employment and housing stability
Transportation	Referrals to Community Caring Council	Up to 18	Attainment of transportation	Increased utilization of public transportation to allow access to needed social services and for employment
Vocational	Referrals to Mers/Goodwill, Vocational Rehabilitation, and Missouri Career Center	Up to 18	Improved employment	Increased income through gainful employment

EXHIBIT E**SUBMISSION IS MANDATORY****TIMELINE**

The applicant shall complete this form to include each detailed step that will need to be taken to implement the project and to provide services during the entire contract period.

Task or Event	Start Date	Date to be Completed	Assigned Personnel
Assign/re-allocate case management, program manager and support staff	8/3/2015	8/17/2015	Karen Auner-Case Manager Kyle Schott-Program Manager Tyree Chapman-Support Staff Brenda Miller-Case Manager (back up)
Write policies and procedures and develop intake/screening process	8/18/2015	8/31/15	Karen Auner-Case Manager Kyle Schott-Program Manager
Do outreach to community organizations and build relationship with probation/parole And with area landlords. Set up agreements with possible referral organizations	9/1/2015	9/14/2015	Karen Auner-Case Manager Kyle Schott-Program Manager
Begin to accept new referrals for services	9/15/2015	4/30/2016	Karen Auner-Case Manager
Complete and submit first quarter report	10/1/2015	10/15/2015	Kyle Schott-Program Manager
Complete and submit second quarter report	2/1/2016	2/15/2016	Kyle Schott-Program Manager
Complete and submit third quarter report	5/1/2016	5/15/2016	Kyle Schott-Program Manager
Close new client application process and complete case management services for anyone still enrolled in the program	5/1/2016	7/31/2016	Karen Auner-Case Manager Kyle Schott-Program Manager
Complete and submit fourth quarter report	8/1/2016	8/15/2016	Kyle Schott-Program Manager
Assign/re-allocate case management, program manager and support staff	8/3/2015	8/17/2015	Karen Auner-Case Manager Kyle Schott-Program Manager Tyree Chapman-Support Staff Brenda Miller-Case Manager (back up)

Write policies and procedures and develop intake/screening process	8/18/2015	8/31/15	Karen Auner-Case Manager Kyle Schott-Program Manager
Do outreach to community organizations and build relationship with probation/parole And with area landlords. Set up agreements with possible referral organizations	9/1/2015	9/14/2015	Karen Auner-Case Manager Kyle Schott-Program Manager
Begin to accept new referrals for services	9/15/2015	4/30/2016	Karen Auner-Case Manager
Complete and submit first quarter report	10/1/2015	10/15/2015	Kyle Schott-Program Manager
Complete and submit second quarter report	2/1/2016	2/15/2016	Kyle Schott-Program Manager
Complete and submit third quarter report	5/1/2016	5/15/2016	Kyle Schott-Program Manager

EXHIBIT F

SUBMISSION IS MANDATORY

BUDGET DETAIL WORKSHEET

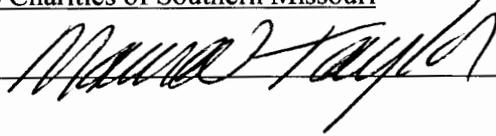
All Expenses Must Be Reasonable and Necessary

COMPLETED FORM MUST BE RETURNED WITH APPLICATION		
A. Personnel (a breakdown in the number of hours each person is dedicated to the project is to be provided)		
Name/Position	Calculation of Cost	Cost
Karen Auner-\$17.41/hour for estimated 17 hours a week for 52 weeks and	\$17.41X884hr/yr	\$15,390.00
Brenda Miller-\$15.27/hour-will assist Karen with estimated 8 hr/week		In-kind
Kyle Schott LPC--mental health assessments and Program Director-4 hr/week		In-kind
Tyree Chapman-administrative assistant-6 hours/week		In-kind
	Subtotal	\$15,390.00
B. Fringe Benefits (must be capped at 12%)		
Name/Position	Calculation of Cost	Cost
Benefits for all four listed staff		In-kind
	Subtotal	
C. Staff Travel (mileage at \$0.37 /mile -- Conus rate for any other expenses)		
Purpose of Staff Travel (all staff travel must be for the <u>direct</u> benefit of the offender -- include location and type)	Calculation of Cost	Cost
	Subtotal	
D. Direct Services (i.e. housing rental/lease, GED Testing)		
****ALL DIRECT SERVICES MUST BE PROVIDED TO THE OFFENDERS****		
	Calculation of Cost	Cost
Rent deposits for up to 18 clients in reentry program-estimate \$400-\$500	\$422.77 X 18	\$7,610
Monthly rent payments(housing) estimated at \$500 for up to three months		\$27,000
	Subtotal	\$34,610
E. Equipment/Supplies (Direct Services Only)		
	Calculation of Cost	Cost
Phone, copies, offices supplies, brochures		In-kind

	Subtotal	
Summary		
A. Personnel		\$15,390
B. Fringe Benefits		
C. Staff Travel		
D. Direct Services		\$34,610
E. Equipment/Supplies (Direct Services Only)		
	TOTAL PROJECT COSTS	\$50,000

By signing below, the applicant hereby declares understanding, agreement and certification of compliance to provide the services or project in accordance with all the requirements and specifications contained herein and in the Terms and Conditions. The applicant further agrees that the language of this RFA shall govern in the event of a conflict of terms with his/her application.

Applicant Company Name: Catholic Charities of Southern Missouri

Authorized Signature of Applicant  Date 6-30-15

Printed Name: Maura Taylor

EXHIBIT G**SUBMISSION IS MANDATORY****BUDGET NARRATIVE**

Applicant must provide justification and detailed description of all budget items listed in Exhibit E.

NOTE: All expenses must be reasonable and necessary.

A. Personnel- Funding under the Reentry Housing Assistance Program will cover the salary costs of Karen Auner for 17 hours a week at 17.41 hour. She will provide housing stability case management services and assist the 18 clients in accessing housing during the grant cycle starting August 1, 2015 to July 31, 2016.

B. Fringe Benefits- Provided by CCSOMO-In-Kind Donation

C. Staff Travel-

- CCSOMO In-Kind Donation

D. Direct Services to the Offenders-

Rental Assistance: CCSOMO will assist with rental deposits and up to three months' rent at an average rent of \$500/Month. Overall assistance average of \$2000 maximum per client. 18 clients provided housing search and housing stability case management services during the grant cycle.

- Estimate 18 rent deposits @ Average cost of \$400- grant request of \$7,610
- 18 clients receive three months of rent assistance at \$500/month for total request of \$27,000

E. Equipment/Supplies (Direct Services Only)

- CCSOMO In-Kind Donation

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: *SEP 15 2009*

CATHOLIC CHARITIES OF SOUTHERN
MISSOURI INC
601 S JEFFERSON AVE
SPRINGFIELD, MO 65806-3143

Employer Identification Number:
80-0455890
DLN:
17053223326019
Contact Person:
JOHN J KOESTER ID# 31364
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
July 24, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

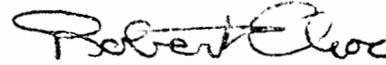
Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

-2-

CATHOLIC CHARITIES OF SOUTHERN

Sincerely,

A handwritten signature in black ink that reads "Robert Choi". The signature is written in a cursive style with a large, looped initial "R".

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Publication 4221-PC