



---

## The Arizona Department of Housing 2018 Information Bulletin

REGARDING PROGRAMS: SPECIAL NEEDS

REGARDING FUNDING SOURCES: HUD Continuum of Care (CoC)

**INFORMATION BULLETIN No. 07-18**

**ISSUED: January 29, 2018**

**RE: AZ Balance of State Continuum of Care Governance Advisory Board  
New Member Applications**

The Governance Advisory Board (GAB) for the AZ Balance of State Continuum of Care (AZBoSCoC) is seeking committed and knowledgeable candidates interested in serving on the GAB. The eleven member, AZBoSCoC Governance Advisory Board is the lead governing entity for the AZBoSCoC providing leadership, strategic guidance and oversight of the AZBoSCoC.

The Governance Advisory Board is responsible for HUD HEARTH Act required Continuum of Care duties including setting continuum and project performance standards, evaluation of CoC funded projects, establishing service standards, improving service coordination, oversight of key systems (ex: Homeless Management Information System and Coordinated Entry), recruiting and overseeing GAB membership, and overseeing the annual process for submission of the AZBoSCoC request for HUD McKinney-Vento Continuum of Care funding which provides approximately \$4 million for housing and services throughout the Balance of State counties. Key GAB member duties include: 1) attendance at regular quarterly meetings; 2) participation in any special meetings to fulfill duties; participation on GAB committees; 4) participation at two day annual retreat; and 3) participation in annual HUD McKinney-Vento Continuum of Care application process. Please see the attached Board member job description. There is no compensation for GAB participation but travel and accommodations related to meeting attendance and GAB duties may be reimbursed.

In seeking candidates, the AZBoSCoC seeks representation of numerous stakeholders involved addressing homelessness in our community including housing and service



1110 W. Washington, Suite 280 | Phoenix, AZ 85007  
Telephone (602) 771-1000 | Facsimile (602) 771-1002 | TDY (602) 771-1001  
[www.azhousing.gov](http://www.azhousing.gov)

providers, law enforcement, behavioral health providers, government officials, health care providers, affordable housing providers, business leaders and community leaders and individuals who have experienced homelessness among others. GAB represents all Arizona Counties except for Maricopa and Pima and encourages representation from all Balance of State counties and communities. The AZBoSCoC and the Arizona Department of Housing comply with all non-discrimination and equal opportunity laws and encourage participation regardless of age, race, ethnicity, national origin, gender, sexual orientation, or disability. Based on current Board composition, we are particularly interested in identifying candidates with experience working with victims of domestic violence, residents from Arizona's Southern Counties, and individuals who have experienced homelessness.

If you are interested in being a candidate for the AZBoSCoC Board, please submit a short cover letter describing your qualifications and interest with the attached application form by **Friday, February 23rd, 2018 by 5:00 pm**. Please submit documents to:

Mail:  
David Bridge  
Continuum of Care Coordinator  
AZ Department of Housing  
1110 West Washington, Ste. 280  
Phoenix, AZ 85007

or

E-Mail:  
david.bridge@azhousing.gov

Thank you



Arizona  
Department  
of Housing

1110 W. Washington, Suite 280 | Phoenix, AZ 85007  
Telephone (602) 771-1000 | Facsimile (602) 771-1002 | TDY (602) 771-1001  
[www.azhousing.gov](http://www.azhousing.gov)

**Arizona Balance of State Continuum of Care (BOSCoC)  
Application For Membership  
BOSCoC Governance Advisory Board**

Thank you for your interest in becoming a member of the BOSCoC Governance Advisory Board: Please complete the following application and email to David Bridge, AZBOSCoC Coordinator at [David.Bridge@azhousing.gov](mailto:David.Bridge@azhousing.gov). If you have any questions about this process, please call David at 602-771-1039.

All applications must be received by February 23, 2018. Announcements will be made by March 8, 2018 if not earlier, so that new members can attend the Governance Advisory Board retreat that takes place each Spring. All applications will be reviewed by the Governance Advisory Board current members.

<b>Date:</b>	<b>Agency Represented (If applicable)</b>
<b>Name:</b>	<b>Title:</b>
<b>Address</b>	<b>City, State, Zip Code</b>
<b>Email:</b>	<b>Phone:</b>
<p><b>1. Please provide a brief summary about why you would like to be a member of the Governance Advisory Board:</b></p>          	
<p><b>2. Please describe your experience and/or your agency's experience related to persons who have experienced homelessness.</b></p>          	

**3. Please describe your understanding of the Balance of State Continuum of Care?**

**4. How long have you been in your current position and how does your work relate to the CoC?**

**5. What sector(s) do you represent either as an individual or as a part of your agency? (Check all that apply)**

<input type="checkbox"/> Local Government Staff <input type="checkbox"/> Local Government Officials <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Local Jail <input type="checkbox"/> Hospitals <input type="checkbox"/> EMT <input type="checkbox"/> Crisis Response Teams <input type="checkbox"/> Mental Health Service Organization <input type="checkbox"/> Substance Abuse Service Organization <input type="checkbox"/> Affordable Housing Developers <input type="checkbox"/> Public Housing Authority <input type="checkbox"/> CoC funded Youth Homeless Organizations  Other _____ _____ _____	<input type="checkbox"/> Non CoC Funded Youth Homeless Organizations <input type="checkbox"/> School Administrators <input type="checkbox"/> School Homeless Liaisons <input type="checkbox"/> CoC Funded Victim Service Providers <input type="checkbox"/> Non CoC Funded Victim Service Providers <input type="checkbox"/> Street Outreach Teams <input type="checkbox"/> Youth Advocates <input type="checkbox"/> Agencies that serve survivors of human trafficking <input type="checkbox"/> Other homeless sub population advocates <input type="checkbox"/> Agencies that serve veterans <input type="checkbox"/> Persons who are homeless or were formerly homeless
---	--

**6. What committee(s) would you be interested in joining? (check all that apply)**

<input type="checkbox"/> Membership	<input type="checkbox"/> HMIS
<input type="checkbox"/> Coordinated Entry	<input type="checkbox"/> Veterans' Services
<input type="checkbox"/> Focus Population-Domestic Violence	<input type="checkbox"/> Focus Population Youth

Focus Population--LGBT

Point in Time Unsheltered Count

**If chosen, I accept and will fulfill the responsibilities of being a Governance Advisory Board Member. Responsibilities include: participation in quarterly Governance Advisory Board meetings, be knowledgeable about the Balance of State Continuum of Care's Purpose and Operations, and accept other responsibilities defined in the AZ Balance of State Continuum of Care Governance Charter which is found at this link.**

<https://housing.az.gov/documents-links/forms/special-needs-continuum>