

TNHA Indian Housing Plan Tribal Proposal Cover Page

Tribes can use this form to submit funding requests to TNHA for consideration in the following year's Indian Housing Plan.

Tribe & Project Contact Information — Please enter your information	
Name of Tribe:	
EIN Number:	
Council President:	
Proposal Contact Name:	
Proposal Contact Title:	
Tribal Office Address:	
Contact Phone Number:	
Contact Email:	

Has your Tribe applied for an ICDBG grant in the past 5 years? Yes No

Does your Tribe or City have a comprehensive plan? Yes No

Project Information Overview — Please provide the following information	
Project Title:	
Project Duration:	
List of Project Partners or Collaborators (if any):	
Match or Leverage Sources:	<input type="checkbox"/> Land / Site Control <input type="checkbox"/> BIA <input type="checkbox"/> Alaska Native Tribal Health Consortium <input type="checkbox"/> ICDBG <input type="checkbox"/> USDA <input type="checkbox"/> Other Tribal Funds / Resources
Approximate Amount Requested Thru the IHP:	
Estimated Amount from Other Sources:	
List of Sources Committing Funding or Land:	
Est. Total Project Amount:	

Completed Project Ownership / Management — Please provide the following information	
Project Ownership:	<input type="checkbox"/> Tribe <input type="checkbox"/> TNHA <input type="checkbox"/> Other
Land Ownership:	<input type="checkbox"/> Tribe <input type="checkbox"/> TNHA <input type="checkbox"/> Other
Operations Management:	<input type="checkbox"/> Tribe <input type="checkbox"/> TNHA <input type="checkbox"/> Other
Other Information:	

Project Overview — Please provide a 3-4 sentence description of your proposed project

Project Detail — Please provide the following information about your project:
<ol style="list-style-type: none"> 1. Target Populations and Problems Being Addressed 2. Intended/Expected Outcomes 3. How Project Will Achieve Intended Outcomes

Authorization — Please complete the following and retain on file

I am authorized to submit this IHP proposal on behalf of my Tribe. I understand and agree TNHA does not guarantee that any proposed project will be included in the following year IHP. If a project is included in the IHP, no funds will be expended on the project until such time that a Memorandum of Understanding or Sub-Recipient Agreement is fully executed for the project between the Tribe and TNHA.

I understand that if there is missing information, as required by TNHA for an IHP project proposal, that the project proposal will not be considered until such time that all required information is provided to TNHA in accordance with IHP proposal guidance.

Authorized Signature

Email Address

Print Name / Title

Date

DO NOT COMPLETE THE FOLLOWING – FOR TNHA ADMINISTRATIVE USE ONLY

Date proposal received by TNHA _____ Date reviewed by TNHA _____

Proposal information complete Yes, If No, missing: _____

Incomplete notice provided to Tribe _____ By: _____ To: _____

Date complete proposal provided to TNHA _____ Complete notice provided to Tribe _____

Date complete proposal provided to TNHA Review Committee for decision _____

Received by TNHA Management

Date

AUTHORIZATION:

TNHA Management

Date

Approved for Inclusion in IHP

Not accepted for IHP, reason: