

**FLEXIBLE HOUSING  
SUBSIDY POOLS  
("FLEX POOLS")  
REQUEST FOR  
APPLICATIONS:**

**(1) TECHNICAL  
ASSISTANCE ACADEMY**

**(2) PLANNING GRANTS**

**May 2, 2025**

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# SUMMARY

- » The Department of Health Care Services (DHCS) is committed to supporting the formation and sustainability of Flexible Housing Subsidy Pools ("Flex Pools") as a way of streamlining the administration of housing subsidies and services in local communities, thereby improving health outcomes through housing stability.
- » This Request for Applications invites applications for two interrelated opportunities in support of Flex Pools:

- (1) Participation in the **Flexible Housing Subsidy Pools Technical Assistance Academy ("Flex Pools Academy")**. The Flex Pools Academy will offer free, tailored technical assistance (TA) to selected local teams ("TA Recipient Teams") with an emphasis on successfully operationalizing the forthcoming Behavioral Health Services Act (BHSA) Housing Interventions and Transitional Rent Behavioral Health Population of Focus. DHCS will select up to ten (10) Recipient Teams, who will begin participation in the Academy with a staggered start in 2025-26. The Academy will run through Spring 2027.
- (2) **Up to ten (10) Flex Pools Planning Grants of approximately \$150,000 each for county behavioral health agencies or tribal entities** who are part of a TA Recipient Team applying for the Flex Pools Academy. These Planning grants will be funded through Behavioral Health Bridge Housing (BHBH) authority. Planning grants will be awarded to successful applicants in a single round in summer 2025.

- » For both opportunities, applications are due **June 13, 2025**. Organizations selected for both opportunities will be notified in **July 2025**.

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## ABOUT FLEX POOLS

Flex Pools have the potential to improve access to safe and stable housing for Californians, and to better integrate housing with health care. Already operating in some California counties, Flex Pools are a model for administering and coordinating multiple streams of funding for rental and housing subsidies and engaging landlords. They can provide a solution for the provision of timely rent payments under a Medi-Cal reimbursement payment environment; for seamless continuity of rental assistance while transitioning from one funding source to another; and for the coordination and sequencing of rental assistance with housing-related supportive services, including Community Supports under CalAIM (e.g., Housing Navigation Transition Services, Housing Tenancy and Sustaining Services). Flex Pools have the power to create efficiencies by recruiting and managing relationships and timely payments across a single, comprehensive network of landlords, opening up faster access to housing for those experiencing homelessness than is possible through individual contracts.

The upcoming launches of Medi-Cal Transitional Rent and BHSA create unprecedented opportunity to assist individuals in achieving better outcomes through housing stability. With this opportunity comes the challenge of coordinating and aligning the work of Managed Care Plans (MCPs), county behavioral health agencies, and other key partners in the homeless services and rehousing systems.

For more information on Flex Pools, please review the [Flex Pools TA Resource](#), Request for Application (RFA) materials, and other Flex Pool resources on [DHCS' Housing for Health webpage](#).

## PART I: FLEX POOLS ACADEMY

The Flex Pools Academy will offer flexible, tailored support from a team of Flex Pool faculty, with support from DHCS, who bring deep statewide expertise in housing, health care, and Flex Pools: Alison Klurfeld, Whitney Lawrence, and Marc Trotz. Flex Pool faculty have years of experience working to launch, scale, and partner with Flex Pools, as well as deep knowledge of California's housing and healthcare landscapes.

The purpose of the Flex Pools Academy is to:

- » Assist organizations to launch or expand a sustainable Flex Pool model in their locality;
- » Help communities identify resources and partners to establish or further develop their Flex Pool; and

- » Provide strategic guidance to navigate local challenges and develop tailored solutions.

TA participants will receive coaching, connection to informational resources, targeted facilitation support to engage local partners, and program design expertise and strategic advisement to develop, implement, and strengthen their local model. TA can be for up to 24 months but may be shorter depending on team needs and resource availability. The TA is intended to be individualized to meet local needs and address gaps and barriers to standing up Flex Pools in any particular locality. **The Flex Pools Academy is offered to TA recipients at no charge**, although recipients will be responsible for expenses such as travel to in-person convenings.

Flex Pool faculty can support TA recipients in all stages of Flex Pool development, such as visioning to develop a new Flex Pool or strengthening an existing Flex Pool, identification of potential funding sources, procurement of a Flex Pool Operator and/or other vendors, and development and implementation of operational and financial processes to launch services. Faculty will not create staffing plans, budgets, procurement documents, or workflows on behalf of TA recipients but will instead offer advisement on optimal Flex Pools structure, thought partnership, document review, and example resources when available. TA recipients may be asked to share information on progress and learnings on a biannual basis.

Each “TA Recipient Team” (as defined below) will engage in a mix of local and all-team activities. Applicants should be prepared to participate fully in all Flex Pool Academy activities, including:



TA goals and content areas for coaching sessions will be determined primarily by the TA recipients, focusing on issues that are of most value and urgency in the local context. TA recipients will have dedicated staff working with the Academy faculty and should expect to spend time developing their Flex Pool in addition to time spent on Academy activities. Teams who are consistently participating in Flex Pools Academy activities and meeting their goals will continue TA until the end of the Academy or until their goals are met. Teams who are no longer able to participate consistently or meet their goals may be asked to temporarily suspend TA or to exit the Academy early.

## Flex Pools Academy Applicant Eligibility Criteria

The Flex Pools Academy is designed for organizations acting as, or intending to act as, Flex Pool Lead Entities and their local partners. As described in the [Flex Pools TA Resource](#), the Lead Entity plays the role of convener and “system driver,” bringing funders and other key organizations together to design, launch, develop, and oversee a Flex Pool. The intended Lead Entity may be a government entity (e.g., County, city), a Medi-Cal MCP, a Continuum of Care (CoC), or other nonprofit entity with an established role in their local homeless services, housing or rehousing system.

Each TA Recipient Team will be a select group of approximately five members, including, to the greatest extent possible, members with decision making authority in establishing or improving the Flex Pool. Each team **must** include:

- » Actual or intended Flex Pool Lead Entity.
- » Actual or intended Flex Pool Operator, if applicable.
- » **At least one** team member from an MCP or county behavioral health agency (may be fulfilled by the Lead Entity); ***both are preferred.***
- » **At least one** team member from a current or intended funder of rental subsidies in the locality (If the Lead Entity is a county behavioral health agency or MCP, this requirement is fulfilled. If not, the funder must be a different organization from the Lead Entity.).

**To qualify for the Flex Pools Academy, the actual or intended Flex Pool Lead Entity must lead the application.** Lead Entity applicants must meet all of the following requirements:

- » Intend to act as the Lead Entity either to launch a new Flex Pool or to expand and strengthen an existing Flex Pool (or elements of a Flex Pool), in their locality **within the next 18 months.**
- » Demonstrate leadership support within their own organization.
- » Have an established role in the local homeless services, housing, or rehousing system, including a history of serving Medi-Cal members and/or individuals with serious behavioral health conditions.<sup>1</sup>
- » Demonstrate support from all intended members of the TA Recipient Team, as described above.
- » Demonstrate commitment to championing the Flex Pool to others in the community beyond the team.

**DHCS will review only one application per locality;**<sup>2</sup> potential applicants must coordinate with other local partners to decide which organization should complete the application and which should sign on to partner.

Applicants should attend DHCS' informational webinar and carefully review the [Flex Pools TA Resource](#), RFA materials, and other Flex Pool resources on [DHCS' Housing for Health webpage](#) prior to completing their application. DHCS will not review late or incomplete submissions.

<sup>1</sup> The Flex Pools RFA aligns its definition of serious behavioral health conditions with BHBH Program eligibility criteria. See [Attachment C: Definitions](#) for full definition of "serious behavioral health condition."

<sup>2</sup> TA Recipient Teams should define their locality, which may include one or more counties, depending on the intended population served by the Flex Pool.

## **Flex Pools Academy Selection Process & Criteria**

DHCS intends to select up to ten TA Recipient Teams, who will begin participation in the Academy with a staggered start.

Once selected, TA recipients will join the Flex Pools Academy in either summer, fall, or winter 2025-2026, based on the level of readiness indicated in their application.

DHCS will select TA recipients that reflect differing needs across California, and may consider geographic diversity, community size, Flex Pool model and maturity level, among other factors, when selecting recipients.

Competitive applicants will meet all eligibility criteria listed above. They will demonstrate organizational interest in and commitment to the Flex Pool model, with a particular emphasis on supporting communities to successfully operationalize BHSA Housing Interventions and Transitional Rent. Priority will be given to applicants who demonstrate more than one key partner, especially partnership with both county behavioral health agencies and MCPs. All decisions are final.

## **Flex Pools Academy Application Submission**

Before beginning this application, please review the eligibility criteria, selection criteria, and other important information available on the [DHCS Housing for Health website](#). Applicants should attend the informational webinar and carefully review the [Flex Pools TA Resource](#), RFA materials, and other Flex Pool resources prior to completing their application.

### **Academy Application General Instructions and Format Requirements**

The submitted application must include all required content, as detailed below. DHCS recommends that applicants use the template provided in Attachment A to record all responses. DHCS will determine the responsiveness of an application by the quality of its content, not its volume, packaging, or displays.

The narrative portion of the application shall be formatted as follows:

- » Use one-inch margins at the top and bottom and on both sides.
- » Use a font size of no less than 12 points.
- » Sequentially paginate the pages in each section.

### **Academy Application Content Requirements (Attachment A)**

Applications must conform to the word count limitations specified in this section and be assembled in the following order:



## Organization & Team Information

The information in this section is required, but not scored.

1. Lead Entity Name
2. Lead Entity Address
3. Organization Website
4. Application Contacts: Primary & Alternate
  - a. (Name, Title, Email, and Phone Number)
5. Organization Type
  - a. (County, City, MCP, CoC, Other)
6. Proposed TA Recipient Team Members
  - a. (Name, Title, Organization, Email, and Phone Number)
  - b. Is the Lead Entity or a Team Member applying for Part II Flex Pool Planning Grant?
    - i. (If yes, provide Agency)
7. Geographical area served by actual or intended Flex Pool

## Narrative Application Questions

In preparing this section, do not simply restate or paraphrase information in this RFA. Respond in the applicant's own words, to the following narrative questions. The information in this section is worth 20 points.

1. What is the Lead Entity's current role in the local homeless services, housing, or rehousing system? *(responses should be no more than 50 words)* **2 points**
2. Explain why the Lead Entity is well-positioned to be the Lead Entity for a Flex Pool. *(responses should be no more than 200 words)* **2 points**
3. What is the Lead Entity's history serving people experiencing or at risk of homelessness, including Medi-Cal members and/or individuals with serious behavioral health conditions? Have you ever provided or administered any rental subsidies to people experiencing or at risk of homelessness? *(responses should be no more than 150 words)* **2 points**
4. **If your community does not already have a Flex Pool**, describe your vision for the Flex Pool model, including why a Flex Pool is needed in your community and any strengths of your local landscape that will support the successful launch of a Flex Pool. Please include your thinking about how implementation of Transitional Rent, BHSA Housing Interventions, and any local funding sources could be supported by the Flex Pool. In addition, please be sure to include any relevant details on work already done to launch a Flex Pool.

**If your community has a Flex Pool or elements of a Flex Pool**, describe the status of implementation and the key problems to be solved through TA. Please include your thinking about how implementation of Transitional Rent, BHSA Housing Interventions, and any local funding sources could be supported by the Flex Pool. *(responses should be no more than 300 words)* **6 points**

5. List the current or potential partners that will participate in your Flex Pool and what level of engagement your organization has had with them to date about establishing or strengthening your Flex Pool. It is required that you discuss your current relationship with the county behavioral health agency, MCPs, and other homeless services and re-housing system leaders in your community, such as the CoC and Public Housing Authorities. *(responses should be no more than 300 words)* **4 points**
6. What barriers will need to be overcome in your community to successfully establish a Flex Pool? Are there identified barriers to accessing key funding sources? *(responses should be no more than 200 words)* **4 points**

### **Technical Assistance Needs**

The information in this section is required, but not scored.

1. When do you intend to launch your Flex Pool?
2. When will you be ready to start technical assistance (TA)?
3. Please identify the top 2-3 key areas of support in which you would like to receive TA:
  - a. Identify and engage partners and funding
  - b. Determine cost considerations
  - c. Developing high-level design of Flex Pool (populations of focus, partner roles, etc.)
  - d. Identify and engage a Flex Pool Operator
  - e. Develop partner agreements and processes
  - f. Other

### **Statements of Support**

The information in this section is required, but not scored.

A statement of support is required from the leadership of each organization who will participate in the TA Recipient Team (described above), including the Lead Entity itself.

Please provide a list with the names of organizations who are submitting statements of support. Additionally, include statements of support as separate attachments in the

submission email. Please label all statements of support with the following file format: "Statement of Support-[Name of Organization Submitting]."

Statements of support can be simple and do not need to be a full letter. The following template language is optional and is provided for your convenience:

*[Government Agency /Potential Partner Name]* supports the *[proposed Lead Entity]*'s efforts to launch a Flex Pool in *[local jurisdiction]*, and we intend to participate as a member of the TA Recipient Team.

## **PART II: FLEX POOLS PLANNING GRANTS**

DHCS is issuing planning grants through this RFA for county behavioral health agencies or tribal entities to support the Flex Pool model in their communities, and the team receiving TA through the Flex Pool Academy. Grants will be approximately \$150,000. Only one grant will be awarded per each TA Recipient Team. Planning grant funds must be encumbered or expended no later than June 30, 2027. DHCS is seeking applicants who can successfully demonstrate their intent to lead or support their local Flex Pool.

The Flex Pools Planning Grants will be funded through BHBH authority. BHBH funding is intended to help county behavioral health agencies and tribal entities address homelessness for people with serious behavioral health needs. Counties and tribal entities should note that, whether or not they successfully apply for Flex Pools Planning Grants, they may direct their BHBH dollars to be managed by a flex pool. BHBH funding previously awarded to county behavioral health agencies and tribal entities can be reviewed for the potential to support the formation of a flex pool. To determine this potential, county behavioral health agencies and tribal entities should work with their DHCS county lead to review their program plan and budget for eligible costs and updates.

### **Flex Pools Planning Grants Applicant Eligibility Criteria**

To qualify, applicants must be California county behavioral health agencies or tribal entities who have indicated their intent to participate in the Flex Pools Academy in the Flex Pools Academy application process (Part I of this RFA).<sup>3</sup> Successful applicants do not have to be or intend to be the Lead Entity.<sup>4</sup>

### **Flex Pools Planning Grants Eligible Uses**

Planning grants can and should support the efforts of the Flex Pool TA Recipient Team, including both the applicant and other participating organizations.

Planning grants may be used for:

- » Costs for staff or consultants to convene meetings, draft materials, conduct background research and needs assessment(s), develop educational and outreach materials to assist with engaging stakeholders

<sup>3</sup> Tribal entities as defined in the Behavioral Health Bridge Housing Tribal Entities Request for Application Round 2b [BHBH-Round-2B-RFA-FINAL 508.pdf](#)

<sup>4</sup> The Los Angeles County Department of Mental Health and Los Angeles County Substance Abuse Prevention and Control qualify to apply for individual planning grants.

- » Supplies and materials
- » Meeting costs to support Flex Pool development or improvement
- » Community and provider engagement via onsite and virtual meetings
- » Travel or other costs to support stakeholder participation
- » Technology to support the launch or operations of a Flex Pool (e.g. client relationship management system, financial documentation and billing software, data analysis or visualization software, data exchange planning and/or implementation)
- » One-time startup funds to support Flex Pool launch or expansion

The following will not be funded:

- » Debt retirement
- » Operational deficits
- » Partisan activities
- » Religious organizations for explicit religious activities
- » Activities that exclusively benefit the members of sectarian or religious organizations
- » Indirect costs greater than 15% of total

## **Funding Information**

All awardees will be expected to participate in all activities and reporting of their Flex Pool Academy team, as appropriate. Awardees will submit a final progress report in March 2027. The progress report will include a narrative of actual expenditures. Awardees may defer receipt of the planning grant to a separate county agency. Grants will be distributed in two payments: upon initial award (approximately 70%) and upon submission of a final progress report (approximately 30%).

All awardees must meet all federal and state funding restrictions, reporting, and compliance requirements as determined by DHCS.

## **Flex Pools Planning Grant Selection Process & Criteria**

DHCS will select planning grant awardees based on demonstrated funding needs and will look to support Flex Pool applicants with a commitment to participate in their local Flex Pool.

# Planning Grant Application Submission

## Planning Grant Application General Instructions and Format Requirements

The submitted application must include all required content, as detailed below. DHCS recommends that applicants use the template provided in Attachment B to record all responses. DHCS will determine the responsiveness of an application by the quality of its content, not its volume, packaging, or displays.

The narrative portion of the application shall be formatted as follows:

- » Use one-inch margins at the top and bottom and on both sides.
- » Use a font size of no less than 12 points.
- » Sequentially paginate the pages in each section.

## Planning Grant Application Content Requirements (Attachment B)

Applications must conform to the word count limitations specified in this section and be assembled in the following order:

### Agency & Team Information

The information in this section is required, but not scored.

1. Agency Name
2. Agency Address
3. Agency Website
4. Application Contacts: Primary & Alternate
  - a. (Name, Title, Email, and Phone Number)
5. Grant Agreement Signatory:
  - a. (Name, Title, Email, and Phone Number)
6. Name of partner organization applying for Part I: Flex Pool Academy
  - a. Confirmation that applicant provided a statement of support for the Lead Entity applying for Part I: Flex Pool Academy, if different from the county behavioral health agency

### Planning and Goals

In preparing this section, do not simply restate or paraphrase information in this RFA. Respond in the applicant's own words, to the following questions. This section is worth 5 points.

1. Please briefly describe your anticipated, or current, role in the Flex Pool.  
*(responses should be no more than 200 words.)* **2 points**

2. What are three desired outcomes from participation in this planning grant opportunity? *(responses should be a bulleted list)* **3 points**

### **Priorities and Activities**

In preparing this section, do not simply restate or paraphrase information in this RFA. Respond in the applicant's own words, to the following questions. This section is worth 5 points.

1. What activities do you hope to complete as part of this planning grant? *(responses should be no more than 200 words.)* **3 points**
2. What are the near-term priorities for the Flex Pool and how will this planning grant support those priorities? *(responses should be no more than 200 words.)* **2 points**

### **Budget (July 1, 2025- June 30, 2027)**

Submit a high-level budget, including a **brief** narrative of the intended uses of the grant funds. This budget is non-binding and intended for planning purposes only. This section is worth 10 points.

The following intended uses may be considered:

- » Staff costs
- » Consultant costs
- » Supplies and materials
- » Meeting costs
- » Community and provider engagement
- » Travel and other costs to support stakeholder participation
- » Technology
- » One-time startup funds
- » Other

# APPLICATION SUBMISSION INSTRUCTIONS

The application for the Flex Pool Academy and the Flex Pool Planning Grant must be submitted electronically to DHCS **no later than 5:00 p.m., PT, June 13, 2025**, at the email address shown below. Applications received after the specified date and time will not be accepted.

- » Submission email: [FlexPools@dhcs.ca.gov](mailto:FlexPools@dhcs.ca.gov)
- » Subject: RFA Submission [Part I or Part II] by [Name of Applicant Organization]
- » Attachments: Content required in Attachment A for Part I and in Attachment B for Part II

## Reasonable Accommodations

For individuals with disabilities, DHCS will provide assistive services such as reading or writing assistance and conversion of the RFA in braille, large print, audiocassette, or computer disk. To request copies of written materials in an alternate format, please send an email to [FlexPools@dhcs.ca.gov](mailto:FlexPools@dhcs.ca.gov).

## RFA Informational Webinar & Timeline

DHCS and Flex Pool Academy faculty will host an informational webinar for prospective applicants for both Part I and Part II of this RFA on May 12, 2025 from 11:00 -12:00 p.m. PT. Please see more information and registration link on [DHCS' Housing for Health webpage](#). Additional questions regarding the application process may be directed to [FlexPools@dhcs.ca.gov](mailto:FlexPools@dhcs.ca.gov).

Event	Date
Informational Webinar	May 12, 2025, 11-12p.m. PT
RFA Due Date	June 13, 2025, 5p.m. PT
Awards announced	July, 2025



# ATTACHMENT A: FLEX POOLS ACADEMY APPLICATION

## Organization & Team Information

1. Lead Entity Name:
2. Lead Entity Address:
3. Organization Website
4. Application Contacts
  - a. Primary Contact:
    - i. Name:
    - ii. Title:
    - iii. Email:
    - iv. Phone Number:
  - b. Secondary Contact:
    - i. Name:
    - ii. Title:
    - iii. Email:
    - iv. Phone Number:
5. Organization Type:
  - a. Select one: County, City, MCP, CoC, Other
    - i. If Other, please describe:
6. Proposed TA Recipient Team Members

	Name	Title	Organization	Email	Phone
1.					
2.					
3.					
4.					
5.					

- a. Is the Lead Entity or a Team Member applying for Part II Flex Pool Planning Grant? (If yes, provide Agency)
7. Geographical area served by actual or intended Flex Pool:

## Narrative Questions

1. What is the Lead Entity's current role in the local homeless services, housing, or rehousing system? *(responses should be no more than 50 words)* **2 points**
2. Explain why the Lead Entity is well-positioned to be the Lead Entity for a Flex Pool. *(responses should be no more than 200 words)* **2 points**
3. What is the Lead Entity's history serving people experiencing or at risk of homelessness, including Medi-Cal members and/or individuals with serious behavioral health conditions? Have you ever provided or administered any rental subsidies to people experiencing or at risk of homelessness? *(responses should be no more than 150 words)* **2 points**
4. **If your community does not already have a Flex Pool**, describe your vision for the Flex Pool model, including why a Flex Pool is needed in your community and any strengths of your local landscape that will support the successful launch of a Flex Pool. Please include your thinking about how implementation of Transitional Rent, BHSA Housing Interventions, and any local funding sources could be supported by the Flex Pool. In addition, please be sure to include any relevant details on work already done to launch a Flex Pool.  
  
**If your community has a Flex Pool or elements of a Flex Pool**, describe the status of implementation and the key problems to be solved through TA. Please include your thinking about how implementation of Transitional Rent, BHSA Housing Interventions, and any local funding sources could be supported by the Flex Pool. *(responses should be no more than 300 words)* **6 points**
5. List the current or potential partners that will participate in your Flex Pool and what level of engagement your organization has had with them to date about establishing or strengthening your Flex Pool. It is required that you discuss your current relationship with the county behavioral health agency, MCPs, and other homeless services and re-housing system leaders in your community, such as the CoC and Public Housing Authorities. *(responses should be no more than 300 words)* **4 points**
6. What barriers will need to be overcome in your community to successfully establish a Flex Pool? Are there identified barriers to accessing key funding sources? *(responses should be no more than 200 words)* **4 points**

## Technical Assistance Needs

1. When do you intend to launch your Flex Pool? *(Select one)*
  - a. We already have an active Flex Pool
  - b. Immediately
  - c. Within 6 months
  - d. In about 12 months
  - e. In about 18 months
2. When will you be ready to start technical assistance (TA)? *(Select one)*
  - a. Immediately
  - b. Within 6 months
  - c. In about 12 months
3. Please identify the top 2-3 key areas of support in which you would like to receive TA: *(Select 2 – 3)*
  - a. Identify and engage partners and funding
  - b. Determine cost considerations
  - c. Developing high-level design of Flex Pool (populations of focus, partner roles, etc.)
  - d. Identify and engage a Flex Pool Operator
  - e. Develop partner agreements and processes
  - f. Other

## Statements of Support

Please provide a list with the names of organizations who are submitting statements of support below and include the statements as separate attachments:

# ATTACHMENT B: FLEX POOLS PLANNING GRANTS APPLICATION

## Applicant & Team Information

1. Applicant Name:
2. Applicant Address:
3. Applicant Website:
4. Application Contacts
  - a. Primary Contact:
    - i. Name:
    - ii. Title:
    - iii. Email:
    - iv. Phone Number:
  - b. Secondary Contact:
    - i. Name:
    - ii. Title:
    - iii. Email:
    - iv. Phone Number:
5. Grant Agreement Signatory:
  - a. Name:
  - b. Title:
  - c. Email:
  - d. Phone Number:
6. Name of partner organization applying for Part I: Flex Pool Academy:
  - a. Confirmation that applicant provided a statement of support for the Lead Entity applying for Part I: Flex Pool Academy, if different from the county behavioral health agency: Yes or No

## Planning and Goals

1. Please briefly describe your anticipated, or current, role in the Flex Pool.  
*(responses should be no more than 200 words.)* **2 points**
2. What are three desired outcomes from participation in this planning grant opportunity? *(responses should be a bulleted list)* **3 points**

## Priorities and Activities

1. What activities do you hope to complete as part of this planning grant?  
(responses should be no more than 200 words.) **3 points**
2. What are the near-term priorities for the Flex Pool and how will this planning grant support those priorities? (responses should be no more than 200 words.) **2 points**

## Budget (July 1, 2025- June 30, 2027)

Submit a high-level budget, including a **brief** narrative of the intended uses of the grant funds. This budget is non-binding and intended for planning purposes only. Please insert your text descriptions in the first column and include the total budget amount in the second column of each section.

	<b>Brief Narrative</b>	<b>July 2025 – June 2027 Budget (approx. \$)</b>
Staff Costs		
Consultant Costs		
Supplies and Materials		
Meeting Costs		
Community and provider engagement		
Travel or other costs to support stakeholder participation		
Technology		
One-time startup funds		
Other		
Indirect Costs		Maximum = 15% of grant, \$22,500
<b>Total Planning Dollars</b>		<b>\$150,000</b>