Participation Stipend for Homeless/Formerly Homeless Persons Policy

River Valleys Continuum of Care (MN-502 Rochester/Southeast)

Adopted: April 2007

Purpose
The River Valleys Continuum of Care (CoC) establishes the following policy in regard to the payment of stipends to individuals who are or were homeless for their participation in CoC committee or subcommittee meetings. The CoC values the experiences, perspectives, and ideas of people who have experienced homelessness. The CoC also believes that participation in CoC committees and subcommittees by individuals who have experienced homelessness improves decision-making and increases the effectiveness of our efforts to prevent and end homelessness.

Policy
CoC members serving people experiencing homelessness are tasked to identify individuals who may be interested in and available to participate in CoC planning. CoC members should inform the CoC Coordinator when person who is homeless/formerly homeless is identified and intends to participate.

Homeless/formerly homeless individuals that participate in the Continuum of Care plenary or committee meetings will be paid a stipend of $35.00 for their time when they attend meetings. The CoC will also reimburse homeless/formerly homeless individuals for the following expenses incurred because of their participation: mileage or local bus fare at reasonable or allowed rates, one meal under $15.00 if travel of more than 30 miles is required for CoC participation, and child care during CoC meeting and travel times. CoC members are encouraged to assist participants with ride sharing whenever possible.

To receive the stipend and reimbursement for allowable expenses, the stipend form must be filled out and signed by both the Coordinator and the homeless/formerly homeless individual. A CoC Co-Chair may sign for the CoC in the absence of the Coordinator. The number of total miles driven, receipts for meals, and verification of child care expenses must be submitted before the check will be rendered.

The stipend and reimbursement requests will be processed by the CoC Collaborative Application in accordance with the agency’s fiscal policies.
Meeting Participation Stipend & Reimbursement Form
River Valleys Continuum of Care (MN-502)

Homeless and formerly homeless individuals who participate in River Valleys Continuum of Care meetings may request a stipend and, if applicable, reimbursement of expenses for travel, child care and/or a meal. To be reimbursed for expenses, participant must provide the number of miles driven or receipt for bus fare, a receipt for the allowable meal, and verification of child care expenses. Travel will be reimbursed at $0.50 per mile. Details on allowed expenses are included on the other side of this page.

Participant & Expense Detail:
Participant Name: ________________________________
Meeting Name: ________________________________
Meeting Date: ________________________________
Meeting Location: ________________________________
Stipend: $35.00
Meal: (receipt attached)
Child Care: (proof of daycare rate/cost attached)
Travel: (bus fare receipt attached) OR (______miles X $ .50)
TOTAL: ________________________________

Make check payable to: ________________________________
Mailing address: ________________________________
Phone/email (if questions): ________________________________

Certifications:
Participant: I certify that the expenses described are my own expenses for my participation in the River Valleys CoC. I have not been reimbursed for these expenses from another source.

Signature ________________________________ Date ________________________________

Coordinator/Co-Chair: I certify that I have reviewed the participant expenses and documentation submitted and that I have confirmed participation through meeting minutes or statement by the meeting chair. I recommend that the stipend and expense reimbursements be paid as indicated.

Signature of CoC Coordinator or Co-Chair ________________________________ Date ________________________________