## **Appendix A: DCTA Request Form**

Please submit this form if you are seeking technical assistance under the Distressed Cities and Persistent Poverty Technical Assistance (DCTA) Program. To receive this technical assistance, you must be a representative of a local government (for example, a tribe, city, town, village, or county).

For more information on the Distressed Cities and Persistent Poverty Technical Assistance Program, please visit <a href="https://www.hud.gov/program-offices/comm-planning/cpdta/dcta">https://www.hud.gov/program-offices/comm-planning/cpdta/dcta</a> (https://www.hud.gov/program-offices/comm-planning/cpdta/dcta)

IMPORTANT: Prior to completing this form, it is strongly recommended that you visit the interactive eligibility map located here <a href="https://hud.maps.arcgis.com/apps/instant/interactivelegend/index.html?appid=387154527c684255945f726413f1667f">https://hud.maps.arcgis.com/apps/instant/interactivelegend/index.html?appid=387154527c684255945f726413f1667f</a>)

f you experience issues in completing this form, please contact the DCTA team at <u>distressedcities@hud.gov (mailto:distressedcities@hud.gov</u>	<u>v).</u>
* Required	
1. Today's date *	
Format: M/d/yyyy	
2. Are you a representative of a local government? *  For example, a representative of a city, town, village, tribe, county, or municipality	
○ Yes	
○ No	
3. Are you a representative of a nonprofit organization that is partnering with a local government to alleviate persistent poverty in specific areas within their jurisdiction? *	
○ Yes	
○ No	
4. Please provide the name of the local government and the contact information for the primary person you're in communication with at that local government. *	
Important note - the local government must submit this request form but will have the opportunity to identify you as a partner in their technical assistance engagement.  Please refer your local government contact to this form.	

	Name of Local Government *  Examples of local governments include cities, towns, villages, tribes, counties, and municipalities		
6. 5	tate *		
^	lame of the state where your local government is located.		
7. T	otal Population *		
	Please provide the total population from the most recent ACS 5-Year Estimates. If your local government's total population is not within the range of 2,000 and 50,000, you may still submit a request, however your request may not be prioritized.		
Т	he value must be a number		
<u> </u>	lased on the interactive map available at the below URL, which category for DCTA is your local government eligible under? https://hud.maps.arcgis.com/apps/instant/interactivelegend/index.html?appid=387154527c684255945f726413f1667f https://hud.maps.arcgis.com/apps/instant/interactivelegend/index.html?appid=387154527c684255945f726413f1667f)		
}	ou may select more than one category. You must be eligible under at least one category to receive technical assistance through this program.		
(	Category 1 - Economically Distressed		
(	Category 2 - Experiencing Persistent Poverty		
(	Categories 1 and 2		
(	Exception Category: Tribe or Territory Government		
(	None of the above		
T F 7	are you submitting this request for technical assistance (TA) with the intention of partnering with another entity during the A engagement?  Partnering with another entity will not impact the decision to approve or deny your request. *  The other entity may be another local government in your area experiencing similar challenges or working on similar priorities.		
	he other entity may be a non-profit organization with 501(c)3 status that is working to alleviate persistent poverty in specific areas within your urisdiction.		
(	Yes		
(	No No		
(	Maybe Maybe		

l0. Provide the name of the entity(s) you intend to partner with along with information for your primary point of contact at each entity. *
11. Describe the court of the continues of the continues of the continue of the continue of the continue of the continues of
11. Provide the name of the entity(s) you are considering partnering with along with information for your primary point of contact at each entity. *
12. Please describe the internal process(es) for which you need assistance.  Examples include (1) gathering and analyzing data that is representative of the community and illuminates unmet needs; (2) developing policies and procedures for financial management; (3) implementing and tracking progress of a recently adopted plan; (4) building cross-sector partnerships, or (5) establishing equitable community engagement practices. *  These are examples, we strongly encourage you to list areas specific to your organization where you could benefit from capacity building technical assistance.

13. Of the internal processes you listed on the previous question, which is your top priority?
14. Which specific program areas, for example economic development or housing, do you need technical assistance? Examples may include - workforce development, commercial corridor revitalization, small business supports, preserving existing housing stock, acquiring and redeveloping vacant or rundown houses, providing temporary housing for persons experiencing homelessness, or financing new affordable housing development. *
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15. Of the areas you described on the previous question, which is your top priority? *
16. Is the city manager, or someone in an equivalent position, aware you are submitting this request? *  Note: it is strongly recommended that the city manager or equivalent be made aware of this program prior to submitting a request.
○ Yes
○ No
17. Is the finance director, chief financial officer, accountant, or person in an equivalent position aware you are submitting thi request? *
Note: it is strongly recommended that the finance director or equivalent be made aware of this program prior to submitting a request.
○ Yes
○ No

18. Have you worked with your local HUD office before?
https://www.hud.gov/program offices/field policy mgt/localoffices (https://www.hud.gov/program offices/field policy mgt/localoffices)
○ Yes
○ Na
○ No
○ Maybe
9. Who is your HUD Field Office contact?
20. Point of Contact for this Technical Assistance Request *
Full Name Position/Title
Email Address Phone Number
Priorie Number
21. Upon reviewing your request, the DCTA team will contact you to schedule a follow-up call to better understand your
needs. This call is most productive if the city manager (or equivalent), finance director (or equivalent), and community or
economic development director(s) are present. *
Please provide the names, titles, and email addresses for the individuals that should participate in this call.
This content is neither created nor endorsed by Microsoft. The data you submit will be sent to the form owner.