## PREVIOUS PARTICIPATION FORM INSTRUCTIONS - PROGRAMS COVERED UNDER 10 TAC §1.302

This form is used for Department Program Awards Not Covered by 10 TAC §1.301

Submit a completed form when applying for or requesting access to Department funds through a Contract or Reservation (with the exception of a household or project commitment contract). The form can be completed by anyone with the knowledge needed to answer all questions.

Provide contact information for the person designated to address questions from TDHCA staff regarding this Form

**Legal Name:** Enter the Applicant or Affiliate (subrecipient/entity/agency/organization) legal name

**Contact Name:** Enter the person's name and title/role **Contact Email:** Enter the contact person's email address

Identify the members of the board of directors, council, or other governing body (as applicable)

**ID #:** An ID # is assigned to each line. Continue the numbering process if attaching additional pages.

First Name: Enter the first name of the member.

Last Name: Enter the last name of the member.

**Home Address:** Enter the name of the City and State of the home address of the identified member.

**Role:** *Identify the role of the member.* 

2. Identify key personnel (Executive Director, CFO, Program Director, etc.), as applicable. Alternatively, if applying for a Community Affairs Program, applicant may attach a separate page certifying compliance with 10 TAC §6.6.

**ID #:** An ID # is assigned to each line. Continue the numbering process if attaching additional pages.

**First Name:** Enter the first name of the key personnel. **Last Name:** Enter the last name of the key personnel.

**Home Address:** Enter the name of the City and State of the home address of the identified key personnel.

**Role:** *Identify the role of the key personnel.* 

3. Identify all TDHCA multifamily (rental) developments the Applicant or Affiliate has owned or Controlled at any time.

a. Place initials in the box, If the Applicant or Affiliate has **NO** prior TDHCA multifamily rental experience.

**TDHCA ID #:** Enter the property number assigned by the TDHCA Compliance Monitoring & Tracking system. **Property Name:** Enter the Development name (as identified in TDHCA Compliance Monitoring & Tracking System)

**Property City:** Enter the name of the city where the Development is physically located.

**Program:** Enter the Program acronym the Development operates under. If layered, identify all programs.

BOND: Multifamily Mortgage Revenue BondsSHTF: State Housing Trust Fund multifamilyHOME: HOME Multifamily Development ProgramNHTF: National Housing Trust Fund ProgramHTC: Housing Tax CreditNSP: Neighborhood Stabilization Program

HTCEX: Housing Tax Credit Exchange Program

TCAP: Tax Credit Assistance Program

**Control began:** *Identify the date that participation/control began.* **Control end:** *Identify the date that participation/control ended.* 

- 4. Identify all Community Affairs or Single Family programs that the Applicant or Affiliate has participated in within the last three (3) years.
  - a. Place initials in the box, if the Applicant or Affiliate has **NO** prior TDHCA Program experience.

**Community Affairs:** Place an "X" next to the program(s) participated in.

CEAP: Comprehensive Energy Assistance Program CSBG: Community Services Block Program

CSBG Discretionary: Community Services Block Program – State Discretionary Funds

**DOE**: Department of Energy Program

LIHEAP WAP: Low Income Home Energy Assistance Program - Weatherization Assistance Program

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**HOME and Homeless:** *Place an "X" next to the program(s) participated in.* 

**HOME:** Home Investment Partnerships Program (includes activity under the Contract for Deed Conversion, Disaster Relief, Homebuyer Assistance, Homeowner Rehabilitation Assistance, Persons with Disabilities,

Single Family Development and Tenant Based Rental Assistance Programs)

**ESG CARES:** Emergency Solutions Grant (ESG) program as part of the Coronavirus Aid, Relief and Economic

Security (CARES) Act

**ESG**: Emergency Solutions Grant Program **HHSP**: Homeless Housing & Services Program

**HTF/OCI:** Place an "X" next to the program(s) participated in.

AYBR: Amy Young Barrier Removal Program

CFDC: Contract for Deed Conversion Program

Bootstrap: Texas Bootstrap Program

Self-Help: Colonia Self Help Centers Program

**NSP:** Place an "X" in the box if *Neighborhood Stabilization Program experience* 

**Other:** *Identify Program Name* 

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