**FORM E: Performance Measures and Funding Ceiling Request**

|  |  |
| --- | --- |
| Legal Business Name of Respondent: |  |

The Applicant shall complete the tables below for their proposed number of MHU site visits per week and unduplicated number of clients served. The Applicant shall also request their proposed funding ceiling to serve these Clients through this form.

Table 1 - Instructions: A. Number of MHU site visits per week: The Applicant must enter their proposed number of MHU site visits per week for each fiscal year.

B. Unduplicated Number of Clients Served: The Applicant must enter their proposed number of unduplicated Clients to be served through the MHU.

C. Proposed Cost per Client: The Applicant must request their proposed funding ceiling, per client.

Table 2 - Instructions: Applicants are not required to apply for all MHU funding components. For any MHU funding component that the applicant is not applying, please mark the box as “n/a.” The Applicant's Source of Funding is the additional funding the Applicant will provide to cover the cost of MHU vehicle.

This form shall reflect all services to be delivered during the Grant Agreement period for FY2027. **Final number of MHU site visits per week, unduplicated Clients to be served, and final funding ceilings will be negotiated with Grantees if selected for award.**

|  |  |
| --- | --- |
| Table 1 | |
|  | FY 2027 (9/1/26 - 8/31/27) |
| **Number of MHU site visits per week** |  |
| **Unduplicated Number of Clients Served** |  |
| **Proposed Cost per Client** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Table 2 | | | | |
|  | MHU Vehicle | MHU Services and Supports | MHU Personnel | MHU Other |
| **Requested Funding for Services by Category (from System Agency)** |  |  |  |  |
| **Applicant’s Source of Funding** |  |  |  |  |

*Note: An* ***Unduplicated Client*** *is an individual that is counted only one time during the program’s fiscal year.*

*\*FY2026 will not be a full contract year, as Grant Agreement will start halfway through the fiscal year.*