Neighborhood Council Funding Program APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

	TION I- APPLICANT INFORMATION	00.0	470002	<u></u>	(10510010
1a)		82-2	2470003	CA	1/25/2018
	Organization Name	Fede	eral I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable
1b)	15701 Sherman Way Ave #8079	Van	Nuys	CA	91409
	Organization Mailing Address	City		State	Zip Code
1c)	same				
	Business Address (If different)	City		State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:				
	Cherise Charleswell (818)521-	8422	cherisech	arleswell@boundle	essbrilliance.org
	Name	Pho	one	Email	
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Signed letter on School Letterhead	or		-Profit (other than religious etermination Letter	s institutions)
3)	Name / Address of Affiliated Organization (if applic	able)	City	State	Zip Code

4) Please describe the purpose and intent of the grant.

Our intent is to ensure that STEM remains accessible to all through the delivery of no cost STEM programming & resources. Through this grant & partnering with MVCC/EACC, we will deliver customized & grade-appropriate STEM boxes to students in Mar Vista. The STEM boxes contain lab journals & all the supplies needed to conduct experiments. We will also be providing a supplemental interactive STEM presentation for students who receive the STEM boxes.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

All funding provided by this grant will be used to assemble & acquire the supplemental educational materials that will be provided to students. The STEM boxes will be distributed prior to the planned STEM presentation.

The project is a direct benefit to families in Mar Vista, particularly those whose children/students do not have immediate access to supplemental STEM educational resources, or who face the "Digital Divide", & cannot easily access the internet & other web-based platforms for educational purposes. More importantly, the students who will receive the STEM boxes, will have them provided at no cost.

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SECTION III - PROJECT BUDGET OUTLINE

You may also provide the Budget Outline on a separate sheet if necessary or requested.

Personnel Related Expenses	Requested of NC	Total Projected Cost
N/A	\$	\$
	\$	\$
	\$	\$
Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
100 STEM boxes \$12/box shipping included	\$1,200	\$1,200
	\$	\$

⁷⁾ Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: (200,00,00)

10a) Start date: 2/ (3/2 (10b) Date Funds Required: 2/13/2 (10c) Expected Completion Date: 4/ 10/2 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?

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11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form,

or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of No	n-Profit Corporation or School Prine	sipal - REQUIRED*						
Cherise Charleswell,	MPH Exec Dir.	$(\sim \sim $	1/12/21					
PRINT Name	Title	Signature	Date					
12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*								
Elizabeth Drr	BoardSecretary	Tip	1/12/21					
PRINT Name	Title	Signature	Date					

* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <u>clerk.ncfunding@lacity.org</u> for instructions on completing this form

⁸⁾ Is the implementation of this specific program or purpose described in Question 4 contingent on any other factors or sources or funding? (Including NPG applications to other NCs) I No Yes If Yes, please describe: