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.The Neighborhood Council, upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

Name of Neighborhood Council you are seeking the grant from: NCWP

Neighborhood Council Name

SECTION I- APPLICANT VERIFICATION INFORMATION

1A)	Playa Vista Elementary	956001908	CA	
	Organization Name	*Federal I.D. # (EIN#)*	*State of Incorporation*	*Date of 501(c)(3) Status (if applicable)*

1B)	13150 W. Bluff Creek Road	Playa Vista	CA	90094
	Organization Mailing Address	*City*	*State*	*Zip Code*

1C)				
	Business Address (If different)	*City*	*State*	*Zip Code*

1D)				
	Address of Affiliated Organization (If applicable)	*City*	*State*	*Zip Code*

Name and address of person designated to receive official/legal notices: ***Name:*** _____

2)	13150 W. Bluff Creek Road			90094
	Street	*City*	*State*	*Zip Code*

3) **Type of Organization- Please select one:** ***(Organizations must be located within the City of Los Angeles)***

☒ Public School *(not to include private schools)* **or** ☐ 501(c)(3) Non-profits *(other than religious institutions)*

Attach Letterhead **Attach IRS Determination Letter**

SECTION II - PROJECT DESCRIPTION

4) **Please describe the Neighborhood Improvement Project for which the grant is intended.**

Help Playa Vista Elementary reduce flying trash! The cafeteria provides food and utensils wrapped in cellophane paper, kids bring their own wrapped food, and trash is created in the classrooms. Ultimately the little bits and pieces of trash get blown into the ocean and cause a lot of problems for marine life. We have tried many ways to reduce trash including assemblies to create awareness and having students pick up trash with gloves and tongs and simply talking about trash pickup frequently. Some good has come of this but the problem is still rampant with even a neighbor complaining about trash getting blown into their area. It is time to act creatively to help eliminate this problem. One interesting way would be to make picking up trash fun and even competitive. We could have each trashcan placed strategically below a basketball hoop designed specifically for the trash cans). Together with students we would build these wooden basketball stands and attach hoops. This fits in perfectly with our STEAM curriculum. This would start our movement towards a TRASH FREE campus.

5) **How will this grant be used to primarily support or serve a non-discriminatory, public purpose and benefit the public at-large.**

SECTION III - PROJECT BUDGET OUTLINE- Please outline the project budget below.

6A)

Personnel Related Expenses	Requested of NC	Total Projected Cost
	$	$
	$	$
	$	$
	$	$

6B)

Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	$	$
	$	$
	$	$
	$	$

7) Is the implementation of this specific program or purpose described in box 4 above contingent on any other factors or sources or funding? ☐ Yes, please describe below ☐ No

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

8) What is the TOTAL amount of the grant funding requested with this application: $ _____

9) What is the expected completion date? ___/___/_____ (mm/dd/yyyy) **(required)**

SECTION IV - PROJECT PRIMARY AND SECONDARY CONTACT INFORMATION

Provide the name, telephone number, fax and e-mail address (if applicable) of the person(s) responsible for the funds and program(s) listed in Section II of this application.

10A) ***First Name*** _____ ***Last Name*** _____ ***MI*** _____

Telephone Number _____ ***Fax Number*** _____ ***E-mail*** _____

10B) ***First Name*** _____ ***Last Name*** _____ ***MI*** _____

Telephone Number _____ ***Fax Number*** _____ ***E-mail*** _____

SECTION V - AFFILIATIONS

11) Is there a former or existing relationship between your organization and a NC board member? ☐ **Yes** ☐ **No**

11A) If yes, did you and/or the board member consult the Office of the City Attorney? ☐ **Yes** ☐ **No**

Type of Relationship	Board Member Name
Example: Former board member	*So Conflicted*

SECTION VI - 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 Appendix A, "What is a Public Benefit," and Appendix B "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

Two signatures required

12A) Executive Director of Non-Profit Corporation or School Principal

PRINT First Name/ Last Name	*Title*	*Signature*	*Date*

12B) Secretary of Non-profit Corporation or Assistant School Principal

PRINT First Name/ Last Name	*Title*	*Signature*	*Date*

SECTION VII - FOR DEPARTMENT OF NEIGHBORHOOD EMPOWERMENT USE ONLY

Date Received

Application ❑ *Complete* ❑ *Incomplete*

Reviewer Name *Date Reviewed*

REVEIWER'S NOTES

Date submitted to Funding Unit

Method: ❑ In-person ❑ E-mail ❑ Fax ❑ Inter-departmental mail

NPG #

Application ❑ *Complete* ❑ *Incomplete*

Funding Unit Notes:

DONE Date Stamp Receipt