

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.

Name of NC from which you are seeking this grant: Venice Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a)	<u>Neighborhood Youth Assoc.</u>	<u>951691297</u>	<u>CA</u>	<u>11/1954</u>
	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	<u>1016 Pleasant View Avenue</u>	<u>Venice</u>	<u>CA</u>	<u>90291</u>
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)	<u></u>	<u></u>	<u></u>	<u></u>
	<i>Business Address (If different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

1d) **PRIMARY CONTACT INFORMATION:**

<u>Mike Hernandez</u>	<u>310.664.8893 ext. 116</u>	<u>mhernandez@nyayouth.org</u>
<i>Name</i>	<i>Phone</i>	<i>Email</i>

2) **Type of Organization- Please select one:**

Public School *(not to include private schools)* **Attach Signed letter on School Letterhead** or 501(c)(3) Non-Profit *(other than religious institutions)* **Attach IRS Determination Letter**

3) Name / Address of Affiliated Organization (if applicable) City State Zip Code

SECTION II - PROJECT DESCRIPTION

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

Neighborhood Youth Association (NYA)'s PERSONAL BEST Program addresses the complex needs of students from low-income families, picking up where schools leave off with a comprehensive, highly structured enrichment program during the critical after-school hours. The goal for the PERSONAL BEST Program is to provide 70 at-risk children and youth ages 6-18 with daily comprehensive, structured academic enhancement, life skills development, college preparation and cultural enrichment programming from 3pm-7pm, August through July of each year. As a result of participation in this program, students solidify their core academic skills (math, reading and writing); demonstrate increased interest in STEM (Science, Technology, Engineering and Math); graduate from high school on time, and pursue higher education.

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)**

NYA's top priorities this year include assisting students to assure that they are working at grade level in essential reading, math, and other competencies. Seeking to close any gaps persisting from remote learning during the pandemic, this tutorial work is vital to NYA's ongoing mission of 100% on-time high school graduation and college placement for youth from under-resourced backgrounds.

The PERSONAL BEST Program is truly exceptional, both for its level of structure and for its comprehensive approach which addresses the needs of the whole child. It is not a drop-in program. Daily attendance is required. By providing academic enhancement, life skills development, college preparation and cultural enrichment, students gain knowledge and self-esteem to make healthy choices in their lives while parents develop the skills that they need in order to support their children's academic and social development. This straightforward, sustained and holistic approach is the basis of the program's success and directly supports NYA's mission.

SECTION III - PROJECT BUDGET OUTLINE

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

6a)	Personnel Related Expenses		Requested of NC	Total Projected Cost
	Salaries		\$ 5,000	\$ 237,970
	Employee Benefits		\$ 0	\$ 75,410
	Other Payroll Expenses		\$ 0	\$ 22,700
6b)	Non-Personnel Related Expenses		Requested of NC	Total Projected Cost
	Professional Fees (Audit & Tax Prep., Payroll Processing)		\$ 0	\$ 16,250
	Facilities (LAUSD Land Use Agreement, Janitorial, Utilities, Repairs & Maintenance, etc.)		\$ 0	\$ 73,110
	Other operating Expenses (Scholarship Awards, Field Trips, Insurance, etc.)		\$ 0	\$ 150,915

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
 No Yes If Yes, please list names of NCs: _____

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) No Yes If Yes, please describe:

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

9) What is the TOTAL amount of the grant funding requested with this application: \$ 5,000.00

10a) Start date: 08 / 19 / 24 10b) Date Funds Required: 07 / 01 / 24 10c) Expected Completion Date: 08 / 15 / 25
 (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?
 No Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

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 Non-Profit Corporation or School Principal - REQUIRED*
Robert Williams Chief Executive Officer Robert Williams 5/11/24
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
Adri Butler Secretary Adri Butler 5/11/24
 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 clerk.ncfunding@lacity.org for instructions on completing this form

District
Director

P.O. Box 2350 Los Angeles, Calif. 90053

▷ NEIGHBORHHOD YOUTH ASSOCIATION, INC
3877 GRANDVIEW BLVD.
LOS ANGELES, CA 90066-4414

Person to Contact:

L BARRAGAN

Telephone Number:

(213) 894-2336

Refer Reply to:

EO(0517)96

Date:

SEPTEMBER 27, 1996

EIN: 95-1691297

Dear Taxpayer:

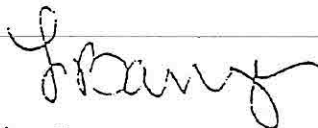
This letter is in response to your request for a copy of the determination letter for the above named organization.

Our records indicate this organization was recognized to be exempt from Federal Income Tax in NOVEMBER 1954 as described in Internal Revenue Code Section 501(c)(3). It is further classified as an organization that is not a private foundation as defined in Section 509(a) of the Code, because it is an organization described in Section 170(b)(1)(A)(vi).

The exempt status for the determination letter issued in NOVEMBER 1954 continues to be effect.

If you need further assistance, please contact our office at the above address or telephone number.

Signed,



Disclosure Assistant