## **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.

SEC	TION I- APPLICANT INFORMATION							
la)	Organization Name	Fed	leral I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable			
lb)								
	Organization Mailing Address	City	′	State	Zip Code			
lc)								
	Business Address (If different)	City	′	State	Zip Code			
1d)	PRIMARY CONTACT INFORMATION:							
	Name	Phone Ema		Email				
2)	Type of Organization- Please select one:  ☐ Public School (not to include private schools)  Attach Signed letter on School Letterhead	or	or 501(c)(3) Non-Profit (other than religious institutions) Attach IRS Determination Letter					
3)	Name / Address of Affiliated Organization (if appl	icable)	City	State	Zip Code			

SECTION II - PROJECT DESCRIPTION

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

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)

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Personnel Related Expenses			
	Requested	of NC	Total Projected Co
	\$		\$
	\$		\$
	\$		\$
Non-Personnel Related Expenses	Requested	of NC	Total Projected Co
	\$		\$
	\$		\$
	\$		\$
ve you (applicant) applied to any other Neighborhood Councils red No	in Question 4	continge	ent on any other fact
ources or funding? (Including NPG applications to other NCs) 🖵 No		If Yes	, please describe:
Source of Funding	Amount		Total Projected Cos
	\$ ¢		<u></u>
	φ \$		\$ \$
	IΨ		I <del>A</del>
o you (applicant) have a current or former relationship with a Boall No			
Name of NC Board Member	Rela	tionship	to Applicant
☐ Yes ☐ No *(Please note that if a Board Member of the NC	has a confli	ct of inte	erest and completes
☐ Yes ☐ No *(Please note that if a Board Member of the NC or participates in the discussion and voting of this NPG, the N	has a confli	ct of inte	erest and completes
☐ Yes ☐ No *(Please note that if a Board Member of the NC or participates in the discussion and voting of this NPG, the N grant in its entirety.)	has a confli	ct of inte	erest and completes
or participates in the discussion and voting of this NPG, the N	has a conflict of Funding Formation of Funding Formation of Funding Fu	and cors a Publication (s) fall of the avoid Country (s) fall of the avoid (s) fall of t	mmunicated otherwic Benefit," and "Clwithin the criteria warding of the Neigncil to whom I am
Yes No *(Please note that if a Board Member of the NC or participates in the discussion and voting of this NPG, the N grant in its entirety.)  TION V - DECLARATION AND SIGNATURE reby affirm that, to the best of my knowledge, the information pro accurately stated. I further affirm that I have read the docume rest" of this application and affirm that the proposed project(s) a efit project/program and that no conflict of interest exist that wooses Grant. I affirm that I am not a current Board Member of the application. I further affirm that if the grant received is not use	has a conflict of Funding Formal Property of Funding Fu	and cors a Publishm(s) fall ood Counce with cil.	mmunicated otherwic Benefit," and "Clwithin the criteria warding of the Neigncil to whom I am
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\* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <a href="mailto:clerk.ncfunding@lacity.org">clerk.ncfunding@lacity.org</a> for instructions on completing this form

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