

ATTACHMENT E

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



City of Los Angeles, Department of Neighborhood Empowerment
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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: N H West NC
Neighborhood Council Name

SECTION I - APPLICANT VERIFICATION INFORMATION

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1A) Organization Name: **7850 ETHEL AVE** Federal I.D. # (EIN#): **N. HOLLYWOOD** State of Incorporation: **CA** Date of 501(c)(3) Status (if applicable): **91605**

1B) Organization Mailing Address: **7850 ETHEL AVE** City: **N. HOLLYWOOD** State: **CA** Zip Code: **91605**

1C) Business Address (if different): **SAME** City: City State: State Zip Code: Zip Code

1D) Address of Affiliated Organization (if applicable): City: City State: State Zip Code: Zip Code

Name and address of person designated to receive official/legal notices: Name: **ANAIT VARDOUMIAN**
2) **7850 ETHEL AVE** City: **N. HOLLYWOOD** State: **CA** Zip Code: **91605**

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)

SECTION II - PROJECT DESCRIPTION

4) Please describe the Neighborhood Improvement Project for which the grant is intended.
SCHOOL NEEDS TO PURCHASE SOUND SYSTEM TO USE DURING FALL FESTIVAL, CST ASSMEBLY, MONTHLY AWARDS ASSEMBLIES, WINTER PROGRAM, BLACK HISTORY MONTH, MULTICULTURAL FESTIVAL, GRADUATION CEREMONY.

5) How will this grant be used to primarily support or serve a non-discriminatory, public purpose and benefit the public at-large?
Parent and community members are invited to attend the above events. These events are a great opportunity for parent and community involvement.

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
MACKIE COMPACT MIXER	\$ 648	\$ 648
PORTABLE SUBWOOFER	\$ 430	\$ 430
DUAL AMP	\$ 380	\$ 380
GIG RIG MIXER RACK CASE	\$ 490	\$ 490

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: **\$ 1,946**

9) What is the expected completion date? **6 / 1 / 2012** (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.

ANAIT VARDOUMIAN

10A) First Name: ANAIT Last Name: VARDOUMIAN MI: MI
Telephone Number: 818 765 0783 Fax Number: 818 501 1111 E-mail: avardoum@lausd.net

10B) First Name: Last Name: MI: MI
Telephone Number: Fax Number: E-mail:

SECTION V - AFFILIATIONS

11) Is there a former or existing membership 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

DRAFT - REVIEW

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SECTION VI - DECLARATION AND ASSURE

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" and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit 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
ANAIT VARDOUMIAN PRINCIPAL
PRINT Name/Last Name Title Signature Date 2/21/12

12B) Executive Director of Non-Profit Corporation or Assistant School Principal
PRINT Name/Last Name Title Signature Date

SECTION VII - FOR DEPARTMENT OF NEIGHBORHOOD EMPOWERMENT USE ONLY

Date Received

Reviewer Name Date Reviewed Application Complete Incomplete

REVIEWER'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