

# City of Los Angeles Office of the City Clerk Neighborhood Council Funding Program



## **Neighborhood Purposes Grants**

Neighborhood Purposes Grants (NPGs) provide NCs opportunities to develop partnerships with local 501(c)(3) nonprofits and public schools to build community and enhance neighborhoods in the City of Los Angeles. Projects and activities supported by NPGs vary widely and can include, but are not limited to:

- The Arts
- Beautification
- Community Support
- Education
- Community Improvements

NPG-funded projects and activities must be for a *public benefit* and purpose, **open**, *accessible*, and *free of charge* to stakeholders.

Grants approved by NCs exceeding \$5,000 involve further review and possible City contract by the Office of the City Clerk.

Visit the NC Funding Program website page on NPGs (<u>click here</u>) to find out more details about how 501(c)(3) nonprofits and public schools serving NC areas can apply. There are two NPG Information Packets; One for prospective applicants to help guide them in the application process, and one for NC board members outlining considerations and factors to keep in mind while evaluating NPG requests.

A "Project Completion Report" template is also provided to help ensure accountability in the use of Grant funds and help demonstrate how NCs and their partners are supporting L.A. communities and stakeholders. NCs and NPG recipients are strongly encouraged to work together to complete and submit the Report at the conclusion of the project.

Any questions you may have with the NPG process, please contact us at the NC Funding Program:

- Clerk.NCFunding@lacity.org
- (213) 978-1058

## Neignbornood 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.

ame	of NC from which you are seeking this grant:	Encino		
SEC	TION I- APPLICANT INFORMATION			
12\	SHE IS HOPE LA	83-2159039	CA	8/29/2018
1a)	Organization Name	Federal I.D. # (EIN#	State of Incorporation	Date of 501(c)(3) Status (if applicable)
1b)	17942 Ventura Blvd	Encino	CA	91316
	Organization Mailing Address	City	State	Zip Code
1c)				
	Business Address (If different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:			
	Tisha Janigian 818-447-75	587 Tisha@	sheishopela.c	org
	Name	Phone	Email	
2)	Type of Organization- Please select one:  ☐ Public School (not to include private schools)  Attach Signed letter on School Letterhead		Non-Profit <i>(other than religiou</i> S <b>Determination Letter</b>	s institutions)
	SHE IS HOPE LA	E	Encino CA	91316
3)	Name / Address of Affiliated Organization (if applica	able) C	ity State	Zip Code

### SECTION II - PROJECT DESCRIPTION

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

This grant supports single mother families with tailored educational programs on financial guidance, job training, peer support and essentials like clothing, shoes, housewares, food, and personal hygiene. By addressing immediate needs, we aim to lift them out of survival mode and empower them for lasting positive change.

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)

This grant is a vital step toward our goal of obtaining an apartment building for affordable housing, supporting single mother families for up to two years. Beyond immediate support, stable housing is fundamental to our mission, fostering long-term transformation in credit and self-esteem. By securing a haven, we recognize the interconnected nature of financial stability, education, and housing in rebuilding lives. Our vision is a holistic solution addressing immediate needs and providing a pathway to sustained independence, breaking the cycle of adversity and empowering single mother families for a lasting impact.

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Pers	onnel Related Expenses		Requested of NC	Total Projected Cost
n/a			\$	\$
			\$	\$
			\$	\$
Non-	Personnel Related Expenses		Requested of NC	Total Projected Cost
Purch	asing personal hygiene supplies, bas	ics and getting to our moms & kids	\$5000	\$5000
			\$	\$
			\$	\$
No	☐ Yes If Yes, p	ther Neighborhood Councils r lease list names of NCs:		
s the im	plementation of this specific	program or purpose describe applications to other NCs)	d in Question 4 conti	ngent on any other factors /es, please describe:
_	ce of Funding	applications to other Nes, =	Amount	Total Projected Cost
			\$	\$
			\$	\$
			\$	\$
				IC?
<b>☑</b> No Name	☐ Yes If Yes, pl of NC Board Member	ease describe below:	Relations	nip to Applicant
		ease describe below:	Relationsl	
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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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