

CWC Scoring App #9

EXHIBIT A *GINA* \$1,396.00

PUBLIC SERVICE GRANT APPLICATION

Organization Legal Name: WE LEAP, Inc.

Mailing Address: PO Box 3852, Fort Pierce, FL 34948

Physical Address: 302 N. 23rd Street, Fort Pierce, FL 34950 (Office Location)

Contact Person: Gwendolyn McLeod Title: CEO & Founder

BEST CONTACT Phone Number: 772-940-1632 Email Address: we_leap@comcast.net

Website Address: http://www.we-leap2.com/

RECEIVED
TIME: *1:45P*
JAN 18 2018
City of Fort Pierce
URBAN REDEVELOPMENT

LEGAL STATUS OF ORGANIZATION:

(X) Incorporated, Not-for-Profit - Month and Year of incorporation/creation: October 2012

- INCLUDE COPY OF CURRENT BUSINESS TAX RECEIPT (BTR) FROM CITY OF FORT PIERCE**
- INCLUDE COPY OF CURRENT 501(c)(3) DOCUMENTATION FROM INTERNAL REVENUE SERVICE.**
- INCLUDE COPY OF NONPROFIT REGISTRATION FROM SUNBIZ.ORG.**

=====

Person Authorized to Sign on Behalf of this Organization. Signature Must Be Notarized.

Gwendolyn McLeod Today's Date: *1/18/2018*
Signature

Print Name: Gwendolyn McLeod Title: CEO & Founder

Telephone Number: 772-940-1632 Email Address: we_leap@comcast.net

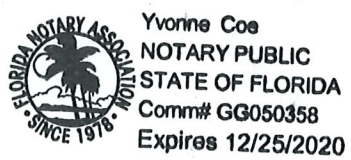
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NOTARY STATE OF FLORIDA, COUNTY OF ST. LUCIE

BEFORE ME, an officer duly authorized by law to administer oaths and take acknowledgements, personally appeared *Gwendolyn McLeod*, who is personally known to me or produced _____, as identification, and acknowledged he/she executed the forgoing Agreement for the use and purposes mentioned in it and that the instrument is his/her act and deed.

IN WITNESS OF THE FORGOING, I have set my hand and official seal in the State and County aforesaid in this *18th* day of *January*, 20*18*.

NOTARY PUBLIC *Yvonne Coe*
My Commission Expires: _____



**THE 2017-2018 PUBLIC SERVICE GRANT APPLICATION
BEGINS ON THE NEXT PAGE.**

Date and Time Stamp

(Do Not Write In This Box)

Grant Amount Requested: \$ 1,396

RECEIVED
TIME: 1:45p
JAN 18 2018

**City of Fort Pierce
URBAN REDEVELOPMENT**

PLEASE SUBMIT AN ORIGINAL APPLICATION AND 7 COPIES

Attach additional pages as necessary.

PLEASE PRINT NEATLY OR TYPE YOUR ANSWERS TO THE QUESTIONS IN THIS APPLICATION.

1. Describe your organization and list your Mission Statement.

Our organization provides **multiple supports for individuals experiencing domestic violence, at-risk of domestic violence, and/or living in areas of high crime and violence.** Our programs include She Matters and He Matters support groups for men and women ages 18 and older who have experienced or are at-risk of domestic violence, in addition to, individuals who desire to **increase their healthy relationship skills and inter-personal relationship competency.** Additionally, our New Beginnings, Mommy Mentoring, and Youth Programs provide valuable resources and support to women and teens throughout the community. Collectively, we use our programs to serve as a platform for teens and adults to network with individuals of various social-economic statuses, professions, and experts of multiple fields that **provide services and resources to them** – with an **emphasis on healthcare, wellness, and mental health.**

Mission: To provide domestic violence awareness presentations and outreach initiatives that educate youth, teens, and adults on how to break the cycle and break the silence of domestic abuse.

2. Describe your organization's history and prior experience, including a description of programs/projects similar to the one you are applying for in this application.

WE LEAP, Inc. (WL) was founded by Gwendolyn "Gwen" McLeod and obtained its 501c3 nonprofit status in 2014. WE LEAP was birthed out of Gwen's past experience as a domestic and teen dating violence survivor and her compassion for others. While working in the social services field as a probation officer, child protective service investigator, and a student support specialist, Gwen saw a disturbing pattern of toxic relationships and domestic violence. Thus, WL was born as a women's empowerment and awareness group. WL has since grown to include community awareness and education for men and teens.

3. List all previous grants awarded by the City of Fort Pierce to **YOU or any organization(s) you were previously or are currently associated with.** If None, write N/A below:

N/A

Please Note: Organizations/Applicants that have received funding for three consecutive years **may be deferred** in order to provide funding for newer activities.

4. If you have received funding from the City of Fort Pierce for Public Service projects in the past, please explain **HOW** the program/project described in this grant application is **NEW OR EXPANDED:**

N/A

5. What is your organization's annual budget? Describe how your organization is currently funded.

Our organizational budget is \$29,100

The organization is funded through:

- Grants
- Donations
- Sponsorships
- Program Fees
- Scholarships
- State & Federal Funds

6. Does the City of Fort Pierce and/or other local organizations in Fort Pierce provide services similar to your agency? Yes

If you answered Yes, how do your services compliment their offerings? If yes, explain.

There are organizations such as Boys and Girls Club, Big Brothers Big Sisters, and others that serve children and youth throughout the community. **Those organization typically are academically based**, offer group mentorship, and opportunities for youth to bond with adults and peers. Our organization **complement those services by providing individuals tangible skills** to improve their interpersonal relationship skills, increase their self-control, and become advocates for others.

How are your services different?

Unlike many programs that serve children, youth, and young adults, our program goes beyond academic tutoring and enrichment. Our program is **designed to enhance the emotional intelligence, decision-making, integrity, and resiliency of the individuals** we serve for them to fortify their ability to make positive lifestyle choices (i.e. abstinence from promiscuous activity, emotional and physical violence, crime, and gangs).

The overarching goals for the program is to:

- Decrease victimization and perpetration among youth
- **Increase healthy teen relationships**
- Create safe and healthy homes, schools and communities

7. Project Name (please keep it short):

WE LEAP SafeTeen Leadership & Summer Youth Symposium

8. U.S. Dept. of Housing & Urban Development (HUD) National Objective Activities: (check one)

- Area benefit** activity (the activity benefits/is open to everyone in a particular low income neighborhood or geography)
- Limited Clientele** activity (particular individuals or households receive a benefit, and the majority of them qualify as low income)
- Presumed Benefit** activity (the activity benefits a group of individuals presumed by HUD to qualify for a benefit: battered spouses, homeless, elderly, severely disabled adults, abused children, illiterate adults, persons with HIV/AIDS, or migrant farm workers)

9. Which National Objective(s) shown below does your project/program(s) meet?

Benefit low to moderate-income persons;

Help in the prevention of slums or blight; and/or

Meet other community needs having a particular urgency because other financial

resources are not available to meet such needs.

10. Beneficiaries from National Objective Activities (#8 Above)

- A. Who are the intended beneficiaries of this program/project? Describe how the project will ensure that the intended beneficiaries are being served and the target population will be reached, including how beneficiaries are identified, and any outreach performed:

The **intended beneficiaries** are low to moderate-income children, teens and young adults ages 10 to 24 that live within the city limits of Fort Pierce and surrounding areas. The area we will recruit participants from will be from Avenue Q to Virginia Avenue (North to South) and US1 to Angle Road (East to West) **within Fort Pierce** city limits. However, our summit will be marketed to all individuals living in St. Lucie County, with an emphasis on our primary intended beneficiaries.

Our education and outreach team will provide information to the intended beneficiaries through social media, radio, churches, civic organizations, children and youth afterschool and summer programs, social service organizations, and local nonprofits that provide programs and services within City of Fort Pierce and St. Lucie County.

- B. If the project will provide an “**Area Benefit**”, please define clearly the geographic area to be served by the proposed activity. Include a map, if necessary. **N/A Not Applicable**
- C. If the project will benefit “**Limited Clientele**”, list the approximate number and percentage of total persons assisted through this project/program who will be Low to Moderate Income (LMI) and how their income level will be determined.

The program will **serve approximately 200 youth. 100% will be low to moderate income.** Income levels **will be determined by the HUD 2017 Income Limits** based on family size.

Department of Housing and Urban Development (HUD) 2017 Income Limits								
Number of People Living in Household	1	2	3	4	5	6	7	8
Extremely Low Income	\$12,650	\$16,240	\$20,420	\$24,600	\$28,780	\$32,960	\$37,140	\$39,750
Very Low Income	\$21,100	\$24,100	\$27,100	\$30,100	\$32,550	\$34,950	\$37,350	\$39,750
Low Income	\$33,750	\$38,550	\$43,350	\$48,150	\$52,050	\$55,900	\$59,750	\$63,600

- D. If the project will provide a “**Presumed Benefit**”, please identify the group(s):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Abused Children | <input type="checkbox"/> Illiterate Adults |
| <input type="checkbox"/> Lower Income Senior Citizens | <input type="checkbox"/> Migrant Farm Workers |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Persons with HIV/AIDS |
| <input type="checkbox"/> Homeless | <input type="checkbox"/> Severely Disabled Adults |
| <input checked="" type="checkbox"/> Lower Income Youth | <input type="checkbox"/> Severely Disabled Children/Youth |

Other: battered spouses, children, and youth

11. Describe the existing problems or needs to be addressed by this program/project.

According to the 2013 St. Lucie County (SLC) Health Needs Assessment, pressing issues facing SLC residents include:

- 1) Residents are food insecure / don't have enough to eat
- 2) Too many children and families are homeless
- 3) Lack of access to healthcare
- 4) Lack of access to affordable housing
- 5) Poor educational outcomes
- 6) Lack of high wages/job growth within the county

Low to moderate income individuals, especially those living in poverty, **experience high levels of stress** because, amongst other reasons, they **live in violent neighborhoods**, relocate twice as often as their counterparts, are five times more likely to be evicted than middle-income citizens, and **are more likely to be bullied in school**.

These chronic stressors experienced by low to moderate-income children and youth are **devastating on their self-esteem**, their ability to learn, and has an adverse effect on the academic outcomes, especially during early childhood **which leads to decreased chances that an individual will graduate** with his or her high school diploma. Inadequate education **contributes to the cycle of poverty** by making it more difficult for low-income children to lift themselves and future generations out of poverty. Thus, the cycle continues for many individuals, especially those living in the City of Fort Pierce where individuals are entrenched in poverty. The median income in Fort Pierce is 25,635, the county has one of the highest prevalence of homicides per capita in the state of Florida, and according to United Way of Florida's ALICE Report 60 to 71% of individuals living in Fort Pierce are classified as living in poverty or working poor.

Describe your proposed project's activities and how they will address the problems/needs you listed in #11 above.

The purpose of SafeTeen Leadership and Summer Youth Symposium is to assist children, youth, and young adults to **build positive character**, embrace healthy lifestyles, and **obtain life/interpersonal relationship skills** that are **not provided through school system curriculum** and/or not regularly offered at afterschool and summer programs.

Individuals who attend SafeTeen Leadership are **encouraged to increase awareness through youth-led civic engagement** and concrete relatable means to their peers. Implementation of those youth-led campaigns includes but is not limited to community canvassing, media, and social marketing.

SafeTeen curriculum consists of sessions a geared toward:

- **Building skills for healthy teen relationships**
- Mobilizing youth leaders
- Engaging parents, school personnel and other adults in creating healthy environments
- **Increasing personal safety, social support and relationship skills**
- Supporting **youth exposed to violence**

Moreover, the Summer Youth Symposium is a semi-annual community wide youth centered event. **The purpose of the event is to increase awareness of issues related to adolescents and teens** in addition to celebrating children and youth for taking a stand against those issues.

The Summer Youth Symposium will **bring community stakeholders together** in a collaborative effort to strategically plan and address issues through resource identification, programs, and policies. Individuals who attended Safe Teen Leadership are encouraged to take leadership roles in designing, promoting, and facilitating the event.

The information and sessions at the symposiums

- **Educating and empowering youth**
- Developing youth leaders and influencers
- Increasing active bystander behavior
- **Supporting parents in promoting healthy teen relationships**
- Providing navigation to needed resources in emergency, transition, and other unforeseen circumstances

The activities that our SafeTeen Leadership and Summer Youth Symposium engage youth in is highly beneficial because **youth development is best promoted through activities and experiences that help youth develop competencies in social, ethical, emotional, physical, and cognitive domains** (Roth & Brooks-Gunn, 2003). Positive experiences and skills gained through our program prepare children, youth, and young adults to be future leaders, show empathy towards others, and **empower them to make a positive impact in their community** and beyond.

(See Program Sheet for SafeTeen Leadership & Youth Symposium

12. List the physical addresses where the your proposed project activities (listed in #12 above) will take place, using street addresses within the City limits of Fort Pierce.

Address of SafeTeen Leadership: 302 N. 23rd Street, Fort Pierce, FL 34950

Address of Symposium: 2408 South 29th Street Fort Pierce, FL 34948

13. List this project's measurable goals and objectives. Date the goals and objectives.

Objective 1: Increased knowledge and awareness of domestic violence and how those issues affect adolescents and teens.

Outcome: 80% of participants are able to identify causes of domestic violence and attributes of healthy relationships.

Objective 2: Increased social and emotional support

Outcome: 80% of participants have or develop a social-emotional support system.

Objective 3: Actively participate as an advocate against domestic violence behaviors / engaging in positive relationship or behavior practices.

Outcome: 80% of individuals will participate in a youth-led initiative or program that advocates against domestic violence and/or the promotion of positive behavioral skills in their relationships.

**All objectives will be completed by the end of the grant performance period
September 1st, 2018**

14. How will you track the results of these goals and objectives? (This information will be required with your monthly status reports.)

The SafeTeen Leadership program will be tracked through intake forms, which include demographic, household size, and income information. Weekly participation will be tracked through sign-in sheets and outcomes will be measured by pre/post tests. Individuals participating in Summer Youth Symposium will be required to register. Registration will include the solicitation of similar data as the intake forms and each individual will complete a participant feedback form.

15. Each of the activities listed in #12. (Examples - number of unduplicated low/moderate income youth served, number of unduplicated senior citizens served, number of unduplicated Veterans served, number of unduplicated adults served, etc.)

Facilitate a SafeTeen Leadership group

The SafeTeen Leadership group will enroll 20 - 30 unique individuals in the structured program where those individuals will participate week to week for the duration.

Host a Summer Youth Symposium for children, youth, and young adults during the summer

The youth summit will be provide education and outreach to an estimated 150 – 175 children, youth, and adults.

16. Amount of Grant Funds requested in this application: \$1,396.00
Amount of other funds secured for this program/project: \$750
Amount of other funds earmarked for the program/project: \$1,480
Total amount needed to complete this program/project: \$3,626

17. Describe your contingency plan in the event this grant request is not fully funded, or not funded at all by the City of Fort Pierce:

If the event is not fully funded, we will continue to fundraise for the event, seek sponsors, and apply for grant funding to subsidize costs.

If this is a multi-year project, how will you continue to implement this project if City grant funds are not available in future years?

Our organization will continue to fundraise for the event, seek sponsors, and apply for grant funding to subsidize costs. Additionally, we will seek other organizations to collaborate with to share and/or reduce costs.

18. Select every qualifier below that best describes your project.

- Improve or enhance education opportunities
- Improve or enhance job training opportunities
- Improve or enhance employment opportunities
- Promote cultural diversity
- Promote outdoor activities and a healthy lifestyle
- Spur interest and participation in neighborhood improvement activities
- Encourage citizen involvement and leverage resources to revitalize low and moderate-income neighborhoods
- Encourage partnerships between City Hall, residents and other community organizations that will result in projects and activities that benefit a community
- Instill and foster community pride
- Promote neighborhood beautification and revitalization
- Promote activities that protect the environment
- Discourage adverse activity such as crime, drug use, and vandalism
- Inspire and support the healthy development of youth

19. Write an explanation below of **how** your project will perform **each** qualifier you selected above:

Improve or enhance education opportunities:

Our program teaches students how to resilient and overcome personal challenges, build relationships with their peers and adults, in addition to being empathetic towards others which strengthens the school's learning community.

Promote cultural diversity

Bullying is a major issue in schools throughout the nation. Our program addresses bullying and other anti-social behaviors that cause inter-personal violence and crime, which is usually due to individuals lack of acceptance for one another. Thus, our program promotes understanding and acceptable of others as well as inclusion.

Discourage adverse activity such as crime, drug use, and vandalism:

Our program teaches children, youth, and young adults about healthy relationships, positive lifestyle choices, and engagement in healthy relationships. We provide them the necessary tools, supports, and skills to avoid violence, especially domestic violence, in addition to not engaging in crime, drug use, and vandalism.

Inspire and support the healthy development of youth

The purpose of our program is to help youth build skills for healthy relationships, encourage them to be leaders in their community, and to increase their personal safety in addition to provide social support and relationship skills. All of the before mentioned enhance and support the healthy development of youth.

Date project to begin: **May 2018**

Date project to be completed: **September 2018**

20. Describe any participant fees that will be required as part of this project/program. Please see "New for Program Year 2017-2018" on Page 4 of the Grant Guidance.

Participants **will not** have to pay any fees.

21. Applicants must demonstrate that the selection of participants is an objective process and Grant Recipient may not limit participation on the basis of race, gender, nationality, ethnicity, religion, creed or disability. How will your project comply with this expectation?

Our program is inclusive and encourages diversity and understanding of all individuals. We try to recruit participants who have varying backgrounds, genders, nationalities, ethnicities, religions, and varying disabilities to bring perspective, compassion, and increased understanding to others. Our selection process is open for all individuals throughout the community to participate in our program.

22. If this project is sponsored by a church or religious group, participation may not be limited to members of the church. What efforts will you make to ensure that the community at-large is aware of this project and the opportunity for participation?

N/A – We're not a church or religious group. See the previous answer about our efforts.

23. Complete a COMPLETE detailed budget below for **THIS** project. List proposed City grant funds and other *committed funds* and 'in-kind contributions', donated professional services, fees and other resources that will be used to complete the project. List a detailed breakdown of individual items. Use specific descriptions, not broad categories. Remember, committed funds and/or in-kind services **must equal at least 25% of your grant request**.

Be sure to include verification documentation of all funds listed below as 'Committed' or 'In-Kind'. Commitments listed in the budget below that lack documentation **will not be counted as commitments**.

Program/Project Expense/Description	City Grant	Other Committed Funds \$\$ Amount or In-Kind	Source of Other Committed Funds or In-Kind Services (Please provide written verification of Every in-kind service listed here from the "Source")
Symposium Costs Food For Summer Symposium - \$652.82 Decorations, Rentals, others - \$200	\$652.82	\$200.00	WE LEAP
T-Shirts for Participants	\$400.00		
Curriculum (160 x 4 = \$320 + SH \$23=\$353)	\$343.00		
DJ for event Symposium		\$200.00	WE LEAP
Program Space & Event Venue		\$600.00	WE LEAP
Salaries, Speaker, Contractors (SafeTeen – 30 per session x 8 sessions x 2 =) (Symposium Speakers - \$750)		\$1,230	WE LEAP
TOTALS	\$1,395.82	\$2,230	
(use more lines/pages as necessary)			

- **Please provide a quote for each item listed that you will purchase with this grant award** in the above Budget under 'Expense/Description'. Each quote should list vendor/company with contact information.

24. Organization Staff and Volunteers

Please complete the information listed below for **each person** in your organization who will work on **THIS** project and the percentage of time they will dedicate to this project, including all volunteers.

Name: Gwendolyn McLeod

Telephone Number: 772-519-6265

Email Address: we_leap@comcast.net

Organization Position: CEO & Founder

City of Residence: Fort Pierce

Qualifications: Work experience includes social services, probation officer, child protective service investigator, and a student support specialist

Professional Licenses: Bachelors Organizational Management & Masters Degree

Organizational Learning and Leadership

Role in Project: Program Administrator

% of Time Dedicated to Project: 100%

Name: Yvonne Coe

Telephone Number: 772-332-6484

Email Address: mvenetia@aol.com

Organization Position: Board Member

City of Residence: Fort Pierce

Qualifications: AS Degree in Business, works with Big Brothers Big Sisters as a reading tutor

Professional Licenses: Notary

Role in Project: Facilitator

% of Time Dedicated to Project: 100%

Name: Stacy Peterkin

Telephone Number: 772-263-5291

Email Address: qweet2347@gmail.com

Organization Position: Contractor

City of Residence: Fort Pierce

Qualifications: BA in Human Services, employed as a program specialist with New Horizons that works with at-risk and troubled children and youth

Professional Licenses: CPR

Role in Project: Facilitate class sessions and provide parents support as needed

% of Time Dedicated to Project: 100%

25. Please attach **ALL** of the documents listed below to your application. Please include a written explanation for EACH document not included:

- ✓ Articles of Incorporation and By-Laws
- ✓ State and Federal Tax Exempt determination letter
- ✓ Employee Identification Number
- ✓ List of Board of Directors with contact information
- ✓ Organizational Chart for your Organization
- ✓ Board of Director's authorization to apply for this grant
- ✓ Last three month's bank statements
- ✓ Annual budgets for 2016 and 2017
- ✓ Most recent audit report (if this is not available, provide written explanation)
- ✓ Matching funds and In-Kind Services commitment documentation (Budget, page 16)
- ✓ Three (3) Letters of Support for this project
- ✓ Newspaper articles, and Thank-You letters, etc., as available, for your organization's work within the City of Fort Pierce.