

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.

The St. Mark Educational Center is a non-profit community organization seated in the heart of Fort Pierce. Our organization has hosted many community programs with the emphasis on “serving others.” Our mission statement is to “ensure a resource center for the people and their neighborhood, where personal, physical, and emotional needs are addressed, thereby equipping them to lead a productive life.

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.

Please see addendum page.

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:

Program Year Amount Purpose

2017-18 N/A

2016-17 N/A

2015-16 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.

\$20,000. The SMEC is currently funded through Alegany Franciscan.

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

Yes. There are several food pantries that are open in the city. Ours will be different because there will be a focus on job placement and career assessment.

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

How are your services different?

We have chosen days that other pantries are not opened so that those in need can find food 4-5 days a week.

7. Project Name (please keep it short):

H.O.P.E. - Healthy, Optimistic, Positive, Energized

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:

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.

Persons living in the Lincoln Park area of Fort Pierce that is unemployed, disabled, or from a low income neighborhood making minimum wage will be invited to participate in this program. Program will be advertised by word of mouth, flyers will be displayed in grocery stores, laundry mats, daycare centers, parks, and in areas where the homeless reside.

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.

Department of Housing and Urban Development (HUD) 2018 Income Limits								
Number of People Living in Household	1	2	3	4	5	6	7	8
Extremely Low Income	\$12,750	\$16,460	\$20,780	\$25,100	\$29,420	\$33,740	\$37,550	\$39,950
Very Low Income	\$21,200	\$24,200	\$27,250	\$30,250	\$32,700	\$35,100	\$37,550	\$39,950
Low Income	\$33,900	\$38,750	\$43,600	\$48,400	\$52,300	\$56,150	\$60,050	\$63,900

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

- | | |
|---|---|
| <input 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 type="checkbox"/> Lower Income Youth | <input type="checkbox"/> Severely Disabled Children/Youth |
| <input type="checkbox"/> Other _____ | |

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

57% of the residents live below the poverty level. The average median household income is \$26,506 compared to the USA median income of \$55,322. Many families don't have computers or have the knowledge to operate one in order to complete food stamp applications, job searches, or job applications. St. Mark will furnish trained staff who will assist in these areas.

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

St. Mark Educational Center will serve those in need of food and assist clients in applying for assistance. The organization will also provide clients with trained staff who will assist them in applying for jobs which are advertised or required to complete online. Clients will undergo job skills training to prepare them for interviews, what to expect on a job, proper dress and work ethics.

13. 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.

St. Mark Educational Center
921 Orange Avenue
Fort Pierce, FL 34950

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

- A. The St. Mark Educational Center will serve an average of 75 clients a week needing food assistance.
- B. The St. Mark Educational Center will assist all clients in completing an application who may qualify for the Food Assistance Program.
- C. The St. Mark Educational Center will assist 10 persons per month in finding employment.

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

For items 14A & B, sign-in sheets will be utilized, the number of clients served, these numbers will be used for monthly reports.

Item C - applications for employment will be used to document this activity.

16. Briefly describe measurements of outcomes for 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.)

The St. Mark Educational Center will devise a report to determine the number of times clients are having to use the resource center for assistance. Tracking will be done through our database system.

17. Amount of Grant Funds requested in this application: \$5,000
Amount of other funds secured for this program/project: \$5,000
Amount of other funds earmarked for the program/project: 0
Total amount needed to complete this program/project: \$5,000

18. 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:

Fundraising efforts are underway to address the needs of the people in our community. Donors will also be sought as well as the continued search for grant funds.

19. 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?

Please see #18.

20. 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

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

- A. Improve or enhance education opportunities - clients will gain education through career training.
- B. Job training will be provided by a certified counselor along with professionals in the area.
- C. Clients will be given assistance in completing job applications, shown where and how to search

for job opportunities.

- D. All nationalities of people living in the Lincoln Park and surrounding areas who is in need will be provided assistance. There are no differences when there are needs for food or a job.
- E. Partnerships with City Hall will allow us the opportunity to reach more, do more to make our community strong and productive.
- F. Everyone feels good when you have food on your table, a roof over their heads, and have a job that provides for your family needs. Pride starts at home and spreads throughout the neighborhood.

22. Date project to begin: March 2019

Date project to be completed: December 2019

23. Describe any participant fees that will be required as part of this project/program. Please see "New for Program Year 2018-2019" on Page 4 of the Grant Guidance.

No participant fees are required.

24. 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?

All persons seeking assistance will be provided services.

25. 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?

The project will be advertised by word of mouth, flyers and announcements in churches, stores, etc. and social media.

26. 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**.

NOTE: Volunteer Hours may be calculated at \$12/hour.

- o **Please provide at least one (1) 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.

Program/Project Expense/Description	City Grant	Other Committed Funds and/or \$\$ Amount or In-Kind	Source of Other Committed Funds or In-Kind Services (Please provide written verification of <u>Every</u> in-kind service listed here from the "Source")
Food Pantry for the community.	\$5,000	\$5,000	Alegany Franciscan
TOTALS	\$5,000	\$5,000	Alegany Franciscan
(use more lines/pages as necessary)			

27. 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 Cynthia Matthews
Telephone Number 772-708-5547
Email Address CynthiaMatthews38@gmail.com
Organization Position Executive Director
City of Residence Fort Pierce, FL
Qualifications 20 years experience working with community projects; six years as leader of school programs; Master's in Education & Counseling
Professional Licenses 42
Role in Project
% of Time Dedicated to Project 20%

Name Sandra Cain
Telephone Number 772-359-4161
Email Address
Organization Position Supervisor of SNAP Program Applications
City of Residence Fort Pierce, FL
Qualifications Supervisor DCF
Professional Licenses B.A. Degree in Social Work
Role in Project
% of Time Dedicated to Project 100%

Name Nancy Spires
Telephone Number 772-519-4039
Email Address nspires207@comcast.net
Organization Position Volunteer
City of Residence Fort Pierce, FL
Qualifications Retired Educator

- _ 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.

ADDENDUM

Question 2:

On April 8, 1994 the St. Mark Educational Center received its State of Florida Incorporation as a non-profit entity. On December 31, 1994 the organization received its 501c3 tax-exempt status, which it holds to this day. After relocating to Orange Avenue, the center began its first operation of a day care center for two years, with 100 students. Due to high operating cost, low tuition fees, and ever-changing state requirements, the day care center was forced to close. From here the center held quarterly scheduled events opened to the public. The events were and are health fairs, back-to-school junctures, business and wellness seminars, outdoor sports and fun activities, plays, festivals, and bazaars. The goals are to have a mixture of diverse groups of experiences for achievements of community success and pride. These events brought out hundreds of participants who range in ages from birth to senior citizens.

The centers growth has lead it to form partnerships with a wide range of community organizations from governmental entities such as the City of Fort Pierce's Urban Redevelopment Department to organizations like the American Red Cross, and a stakeholder akin to Thomas Produce and Agriculture Company. Peppermint Patty's II, the Drop-In program for students who drop-out of school and are pursuing a second chance at receiving a High School degree, a youth offender program through the Department of Corrections and Juvenile Justice, a Senior Citizen's Work Solutions program with AARP, a feeding program for the homeless and disadvantaged, wellness programs that includes diabetic checks and other vital statistic services with collaboration from St. Lucie County Health Department, a food pantry with Treasure Coast Food Bank, a thrift store, and various youth-oriented programs including an annual summer camp.

The center has been granted a \$20,000 grant from Alegany Franciscan and plan to start programs in the coming months.

The SMEC would like to expand its food assistance program, which has been closed for the past year due to storm Irma, to include assisting clients in completing the food assistance application, completing job applications, completing career assessments, and helping clients locate jobs.

The SMEC has partnered with the Economic Development Board who will notify the board of local job openings.