

II. Site Information

Organization: _____

SITE ONE INFORMATION

Site/Program Name: _____

Address: _____

Program Contact Name: _____ Position: _____

Phone: _____ Email: _____

Site Grant Request: \$ _____

This application is (please check one):

- To start a **new program** designed specifically for Middle, Junior or High School youth
- To continue an **existing program** that lacks sufficient funds to operate. Application must include documentation, e.g. a letter of cancellation stating that a current grant will be expiring.

"
"

Check the **three** primary areas of prevention/education the program proposes to offer:

- | | |
|--|--|
| <input type="checkbox"/> Pregnancy/Sexually Transmitted Infection (STI) Prevention | <input type="checkbox"/> Education & Career Readiness |
| <input type="checkbox"/> Violence & Gang Prevention | <input type="checkbox"/> Self Concept & Emotional Intelligence |
| <input type="checkbox"/> Addiction Prevention | <input type="checkbox"/> Positive Interpersonal Relationships |
| <input type="checkbox"/> Civic Engagement | <input type="checkbox"/> Physical Activity & Nutrition |
| <input type="checkbox"/> Financial Literacy | |

SITE TWO INFORMATION

Site/Program Name: _____

Address: _____

Program Contact Name: _____ Position: _____

Phone: _____ Email: _____

Site Grant Request: \$ _____

This application is (please check one):

- To start a **new program** designed specifically for Middle, Junior or High School youth
- To continue an **existing program** that lacks sufficient funds to operate. Application must include documentation, e.g. a letter of cancellation stating that a current grant will be expiring.

Check the **three** primary areas of prevention/education the program proposes to offer:

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|--|--|
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| <input type="checkbox"/> Violence & Gang Prevention | <input type="checkbox"/> Self Concept & Emotional Intelligence |
| <input type="checkbox"/> Addiction Prevention | <input type="checkbox"/> Positive Interpersonal Relationships |
| <input type="checkbox"/> Civic Engagement | <input type="checkbox"/> Physical Activity & Nutrition |
| <input type="checkbox"/> Financial Literacy | |

Office of Work & Family Life – Safe Passages 2012

SITE THREE INFORMATION

Site/Program Name: _____

Address: _____

Program Contact Name: _____ Position: _____

Phone: _____ Email: _____

Site Grant Request: \$ _____

This application is (please check one):

- To start a **new program** designed specifically for Middle, Junior or High School youth
- To continue an **existing program** that lacks sufficient funds to operate. Application must include documentation, e.g. a letter of cancellation stating that a current grant will be expiring.

Check the **three** primary areas of prevention/education the program proposes to offer:

- | | |
|--|--|
| <input type="checkbox"/> Pregnancy/Sexually Transmitted Infection (STI) Prevention | <input type="checkbox"/> Education & Career Readiness |
| <input type="checkbox"/> Violence & Gang Prevention | <input type="checkbox"/> Self Concept & Emotional Intelligence |
| <input type="checkbox"/> Addiction Prevention | <input type="checkbox"/> Positive Interpersonal Relationships |
| <input type="checkbox"/> Civic Engagement | <input type="checkbox"/> Physical Activity & Nutrition |
| <input type="checkbox"/> Financial Literacy | |