



2018 COMMUNITY FOR ALL GRANT PROGRAM APPLICATION FOR FUNDS

RECEIVED  
SEP 19 2018  
CITY MANAGER

SECTION 1: ORGANIZATION INFORMATION

Organization: Catholic Charities of Santa Clara County

Address: 2625 Zanker Road, Suite 201, San Jose, CA 95134

Phone Number: ( 408 ) 468-0100

Website URL: www.CatholicCharitiesSCC.org

E-mail: info@catholiccharitiesscc.org

Project Lead Name: Robert Yabes

Project Lead Title: Program Director, Immigration Legal Services

Project Lead E-mail: robert@CatholicCharitiesSCC.org

Project Lead Phone: ( 408 ) 325-5279

Federal Tax ID (if your program is fiscally sponsored, enter the tax ID of your sponsoring organization): 94-2762269

If your program is fiscally sponsored, please enter the name of the sponsoring 501(c)(3):

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_

Title: \_\_\_\_\_

Website URL: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Organizational Background

Year Founded: 1955

Mission: Serve and advocate for families and individuals in need, especially those living in poverty.

Geographic Focus: Santa Clara County

Current number of Paid Full-Time (30+ hours/week) Staff Members: 282

Current number of Paid Part-Time (less than 30 hours) Staff Members: 199

## SECTION 2: PROJECT/PROGRAM/EVENT DESCRIPTION

1. Name of project/program/event

Community Safety & Security Series: Immigration News & Policy

2. Please provide a brief summary of the project/program/event to be funded by the grant.

Support and protect immigrant individuals & families with up-to-date information about immigration policies. CCSCC's Immigration Legal Services team will deliver community talks including existing policies, recent changes, myths v. facts, and Know Your Rights.

3. What is the need or the issue that you are addressing with this grant?

Immigration laws & policies are rapidly changing and confusing the immigrant community. People are scared, making drastic decisions based on rumors and fears. We seek to calm fears and empower local residents to take the right steps for their situation.

4. Who will be served by this grant?

a) Number of individuals total: 200

b) Number of Mountain View residents: 100

c) Particular community groups: Immigrant community, mixed-status families

5. What other similar project/program/event exists to serve Mountain View residents? How is your proposed project/program/event unique from similar projects/programs/events?

To our knowledge, there is no initiative addressing this specific issue in the City of Mountain View or adjacent cities.

6. Will you collaborate with other organizations to deliver the project/program/event funded by this grant? If so, which organizations and how?

Partners will include public and private organizations such as St. Athanasius and St. Joseph Churches, Mt. View's libraries and community centers, and the Day Worker Center. Our Immigration team is also part of the County's Rapid Response Network.

7. This grant will fund a(n):

Existing project/program/event; established in \_\_\_\_\_ (year)

New project/program/event

8. Date(s) and/or duration of project/program/event 12 months (January - December 2019)

### SECTION 3: PROJECT/PROGRAM/EVENT BUDGET

1. Amount of funds requested: \$ 10,000.00  
Grants are limited to no more than \$10,000 per group/organization.
2. Please provide a copy of the budget of the specific project/program/event to which this grant will be applied.
3. Indicate what percentage of the project/program/event budget will be covered by this grant and other sources of funding, if any.  
100% of project costs will be covered by this grant.
4. If this is an ongoing project/program/event, how will you sustain it for the long-term?  
Our team holds similar information sessions and receives funding to do so in other areas of the County. There is an increasing need for accurate information in the community, and we will continue to advocate to funders for support, including for our Mt View series
5. Will you be charging any fees for this project/program/event? If yes, briefly describe.  
We will not be charging fees for this project; services will be free to the public.

### SECTION 4: METRICS AND OUTCOMES

1. Briefly describe 2-3 metrics and/or outcomes that you will use to measure the success of this grant.
  - a. Outcome 1 200 individuals gain knowledge about immigration policy changes.
  - b. Outcome 2 Engage 3 institutions to collaborate and promote outreach efforts.
  - c. Outcome 3 Empower 50 individuals to seek legal assistance for immigration cases.

### SECTION 5: ADDITIONAL INFORMATION TO SUBMIT

1. IRS Determination Letter
2. Organization's budget for current fiscal year
3. Audited or Reviewed Income Statement and Balance Sheet for the last completed fiscal year
4. IRS 990

5. List of Board members and their affiliation
6. City of Mountain View business license
7. Proof of Insurance
8. If you are fiscally sponsored by a 501(c)(3), please provide a signed letter from a representative of that nonprofit. The letter should contain the following:
  - a. A statement that this organization is currently fiscally sponsoring your program and will continue to do so during the period that you would be using Community for All grant funds
  - b. City of Mountain View business license
  - c. Proof of Insurance
  - d. The organization's EIN number
  - e. The organization's contact information
  - f. The name, title, and contact information of the person authorizing the fiscal sponsorship.

**Catholic Charities of Santa Clara County**  
**Immigration Legal Services - Community Safety + Security Series**

**INCOME**

Operating Income

City of Mountain View Community for All	\$ 10,000
<b>Subtotal Revenue</b>	<b>\$ 10,000</b>
<b>Total Revenue</b>	<b>\$ -</b>

**Total INCOME \$ 10,000**

**EXPENSES**

Payroll

Personnel	\$ 6,000
<i>(Outreach Coordinator .12 FTE)</i>	
Benefits	\$ 1,971
<b>Total Payroll Expenses</b>	<b>\$ 7,971</b>

Operating Expenses

Prof. Fees - Auditing	
Prof. Fees - Subcontractors Services	-
Training / Staff Development	
Supplies - Program/Office	\$ 50
Telephone	
IT + Communications Service	\$ -
Postage	
Occupancy	\$ 200
Equipment - AWARDS client intake database	\$ 100
Equipment - Lease/Rentals	
Transportation - Bus and Taxi	
Transportation - Parking	\$ 29
Transportation - Employee Mileage	\$ 150
Conferences - Conventions, Air Fare	
Food	
Website/ Publications	
Professional Liability Insurance	
Other (Computer, Printer)	
<b>Total Operating Expenses</b>	<b>\$ 529</b>

Administrative Support

Administrative Support Service	15.0%	1,500
<b>Total Support Charges</b>		<b>\$ 1,500</b>

**Total EXPENSES \$ 10,000**

**NET INCOME \$ -**

