

JOHNS HOPKINS
KRIEGER SCHOOL
of ARTS & SCIENCES

CITIES
OF
SERVICE

Love Your Block Project Plan and Application

Please email completed application, photos, and property permissions to Love Your Block Fellow at serickson@duluthmn.gov or mail to 615 W 1st St, Duluth, MN, 55802.

Project Leader (name, email, phone):

As the project leader, I agree to:

- Submit before, during, and after photos of any funded project.
- Document and share the measurements of success (e.g. pounds of garbage removed, volunteers engaged) with the LYB team.
- Arrange an in-person or virtual check-in with LYB staff prior to the start of the project.
- Complete a W-9 form to receive funds directly *or* provide LYB staff with a list of needed supplies or services to purchase for the project.
- Recruit at least two volunteers from the neighborhood and work with LYB staff to recruit additional volunteers.
- Communicate with LYB staff if project plans, leader, or resource needs change.

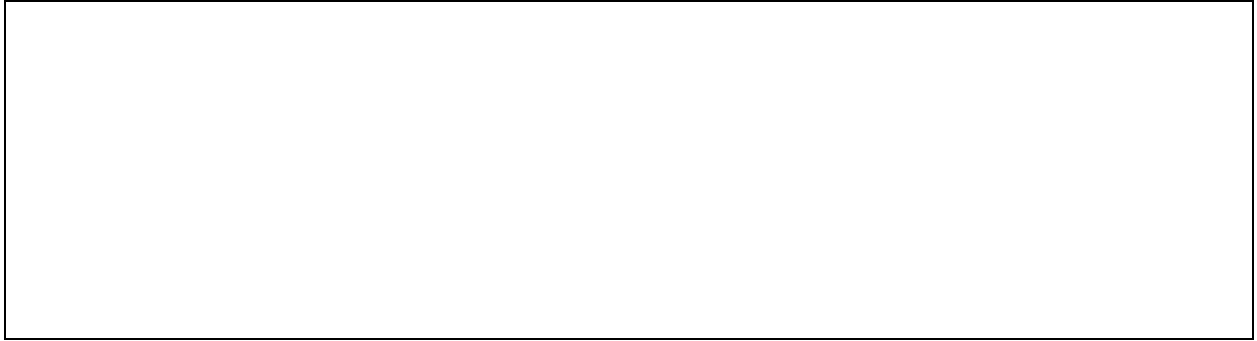
Sign or initial here to agree to above:

Project location: Must be in Central Hillside or Lincoln Park Neighborhoods.

Private or public property? Who owns this property?

Do you have permission to make changes to the site? Written permission from the property owner must be attached to this application.

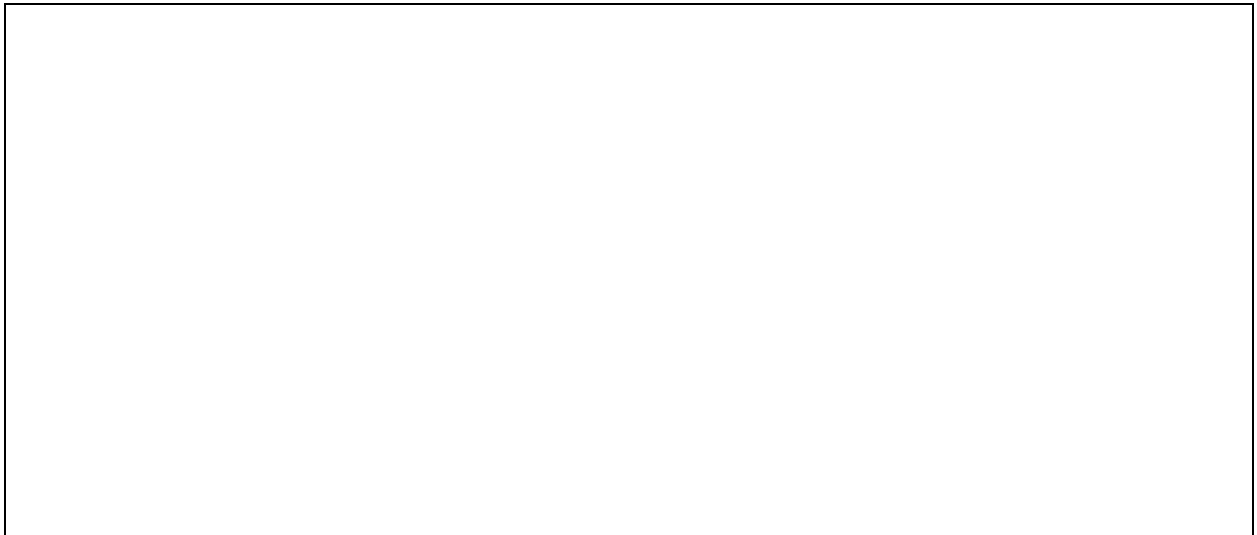
Insert or attach a current photo of the site. Applicants may also text a photo to 218-348-2165 or request that LYB staff take a picture of the site to fulfill this requirement.



Describe the current situation or state of the blighted site.



How will this project improve the current situation and benefit the community? How will it affect people in the neighborhood? How will it affect the environment?



Describe the specific project activities that will improve the site and situation.

[illegible]

Who is responsible for maintaining the site in the future?

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Please list the people and/or roles that will support the project as volunteers or partners. What activities will they be involved with from the list above? Application must include at least two volunteers to be considered. All work must be completed by Sept. 23, 2022.

[illegible]

Please provide a budget that includes all planned and/or estimated expenses for the activities listed above. (Add additional sheets as needed)

Item/Service	Purpose	Vendor	Quantity	Cost per	Total Cost
<i>Ex. 10 foot dumpster</i>	<i>Dispose of collected garbage</i>	<i>Twin Ports Trailer Trash</i>	<i>1</i>	<i>\$250</i>	<i>\$250</i>
PROJECT TOTAL					
LOVE YOUR BLOCK GRANT REQUEST (up to \$1,500)					
OTHER DONATIONS OR GRANTS CONFIRMED					

MINNESOTA DATA PRACTICES ACT—TENNESSEN WARNING

The City of Duluth is asking that you provide information on the Love Your Block Duluth Mini-Grant application form to determine your eligibility and suitability for a grant award.

In accordance with the Minnesota Government Data Practices Act (Minnesota Statutes Chapter 13), the City of Duluth is required to inform you of your rights regarding private data collected from you. We will use your private data only when it is required for the administration and management of the program. Persons or agencies with whom this information may be shared include:

- City of Duluth employees and other persons involved in program administration.
- Auditors who perform required audits of this program.
- Authorized personnel from the other local, state, and federal agencies providing funding assistance for your grant.
- Those persons who you authorize to see it.
- Law enforcement personnel in the case of suspected fraud or other enforcement authorities as required.

The City of Duluth cannot release private data to anyone else or use the private data in any way unless you give the City of Duluth permission by completing a consent form. Please note, however, that data must be released if required by court order. Supplying the information on the application is voluntary. However, a refusal to supply the information requested will mean you will not be considered for the program.

Love Your Block Data Consent Form

All applications are reviewed by the grant review committee without identifying personal information per the policy above. If your project is selected for funding, the Love Your Block team and the City of Duluth will want to share this exciting news with partners and the public.

Please indicate below if and how you would like the Love Your Block team to share information about the project leader and/or organization applicant.

I, the project leader/grant applicant, give consent for Love Your Block and the City of Duluth to share with the public in the form of a press release or other communications in the following ways. Please check all that apply.

- ☐ Project leader's full name
- ☐ Project leader's first name only
- ☐ Name of organization associated with the application
- ☐ Please do not share any of my or my organization's identifying information with the public.

Initial here to confirm consent as indicated above

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Space for additional budget items:

Item/Service	Purpose	Vendor	Quantity	Cost per	Total Cost
PROJECT TOTAL					
LOVE YOUR BLOCK GRANT REQUEST (up to \$1,500)					
OTHER DONATIONS OR GRANTS CONFIRMED					

Space for additional information as needed: