

**GRANT ANALYSIS FORM
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS**

Department/Division: **Health Department**

Contact Person & Phone No: Yvonne Greer, X3619

Category of Request

- New Grant
- Grant Continuation
- Change in Previously Approved Grant

Previous Council File No.

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Project/Program Title: Team Nutrition Training Grant

Grantor Agency: Department of Public Instruction

Grant Application Date: July 2006

Anticipated Award Date: September 2006

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

The Comprehensive School Nutrition Program Initiative (CSNP) will provide outreach, train the trainer programs, technical assistance to schools, and identify 20 schools that meet qualifications to be awarded \$1,000 nutrition and physical activity improvement grants based on a comprehensive school assessment.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

Improve school readiness and healthy behaviors of school aged children.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

4. Results Measurement/Progress Report (Applies only to Programs):

5. Grant Period, Timetable and Program Phase-out Plan:

September 1, 2006 – 2007

6. Provide a List of Subgrantees:

Twenty (2) MPS schools will be chosen to receive \$1,000 nutrition and physical activity improvement grants.

7. If Possible, Complete Grant Budget Form and Attach.