

# GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: *Milwaukee Police Department*

Contact Person & Phone No: *Barb Butler 935-7452*

**Category of Request**

New Grant

Grant Continuation

Change in Previously Approved Grant

Previous Council File No.

Previous Council File No.

**Project/Program Title:** *Milwaukee Police Citizen Academy Program Grant*

Grantor Agency: *Wisconsin Office of Justice Assistance*

**Grant Application Date:** *N/A*

**Anticipated Award Date:** *11/01/09*

**Please provide the following information:**

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

*The purpose of this program is to provide Milwaukee citizens with training and experience in the legal and practical principles of policing in the City of Milwaukee. The graduated citizens will be better able to assist the police department in reducing crime and forging positive police community relations.*

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

*Reducing crime.*

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

*N/A*

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

*N/A*

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

*11/1/09 - 12/31/10*

**6. Provide a List of Subgrantees:**

*N/A*

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