

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

Department/Division: *Milwaukee Police Department*

Contact Person & Phone No: *Barb Butler 414-935-7452*

**Category of Request**

**New Grant**

**Grant Continuation**

**Previous Council File No.** 060873

**Change in Previously Approved Grant**

**Previous Council File No.**

**Project/Program Title:** *Advanced Training Roll Call Grant*

**Grantor Agency:** *State of Wisconsin Department of Justice- Training and Standards Board*

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

**Anticipated Award Date:** *10/17/07*

**Please provide the following information:**

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

*The purpose of this resolution is to provide funding to the Milwaukee Police Department to create training videos for use by the Department as well as the State of Wisconsin.*

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

*The funding received will allow the Milwaukee Police Department to produce videos that will provide continuing education for law enforcement officers in the City of Milwaukee and throughout the state. This continuing education will enhance the skills of Milwaukee Police Officers, enabling them to more effectively and efficiently protect the public and reduce crime in the City of Milwaukee.*

**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:**

*7/1/2007 to 6/30/2008*

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

*N/A*

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