

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**

☐ **Change in Previously Approved Grant**

☐ **Previous Council File No.**

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Project/Program Title: *Project Safe Neighborhood- Anti Gang Grant*

Grantor Agency: *Office of Justice Assistance*

Grant Application Date: *12/5/2007*

Anticipated Award Date: *Received 04/16/08*

Please provide the following information:

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

This resolution authorizes the Milwaukee Police Department (MPD) to accept funding to assist in identifying gang and crime crew members in Milwaukee's central city. Once identified, suppression and abatement efforts will take place.

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

Public safety; reduction of 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:

01/01/08-12/31/08

6. Provide a List of Subgrantees:

N/A

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