

APPLICATION FORM

Applications are due by **August 5, 2022** and should be submitted to Patricia Ruiz-Cantu.

Please answer all questions below. In addition to this completed application, you must also submit the attached **RESIDENT PARTICIPATION FORM**.

1

NAME OF BLOCK WATCH/NEIGHBORHOOD GROUP

BLOCK CAPTAIN NAME

BLOCK CAPTAIN PHONE

2

What is the location of your group and what are the boundaries (blocks) of the area that you cover or plan to cover?

3

The Alert Neighbor Program requires a match from the participating neighborhood for the cost of the safety improvements that will be provided (*see Program Information Sheet for details*). Describe your plan to provide the matching funds required for participation in the program (*e.g., resident contributions, fundraising, donations from local businesses, etc.*).

4 Describe the crime and safety issues that you want to address in your neighborhood.

5 If you are an **EXISTING** block watch or neighborhood group, describe how you have worked together as neighbors in the past 12 months to address crime and safety issues and encourage resident cooperation/collaboration in your neighborhood.

If you are a **NEWLY FORMED** block watch or neighborhood group, describe how you have worked together as neighbors in the past 12 months to address crime and safety issues and encourage resident cooperation/collaboration in your neighborhood.

RESIDENT PARTICIPATION FORM

<input type="text"/>		
NAME OF BLOCK WATCH/NEIGHBORHOOD GROUP		
<input type="text"/>	<input type="text"/>	
BLOCK CAPTAIN NAME	BLOCK CAPTAIN PHONE	

Provide the signatures and addresses of *at least 8* residents (in separate households) who are part of your block watch or neighborhood group and will be participating in the program.

Attach additional sheets if needed.

1	NAME	PHONE	ADDRESS
2	NAME	PHONE	ADDRESS
3	NAME	PHONE	ADDRESS
4	NAME	PHONE	ADDRESS
5	NAME	PHONE	ADDRESS
6	NAME	PHONE	ADDRESS
7	NAME	PHONE	ADDRESS
8	NAME	PHONE	ADDRESS