# **FUNDING APPLICATION**

GENERAL INFORM	<b>ATIO</b>	N			
Organization Information	n				
Legal Name:		Federal Tax ID#:		501(c)(3) Public Charity	
Arms of Hope		51-0416193		509 A (3)	
Address:	City:	1	State:		Zip Code:
21300 State Hwy. 16 N.	Medina		TX		78055
Website:		Fax:		United Way Funded:	
armsofhope.org		(830) 522-2200		No	
Fiscal Year:		1			
July 01 to June 30					
Head Of Organization					
Name:			Title:		
Troy Robertson		CEO			
E-Mail Address:			Phone:		
trobertson@armsofhope.org			(830) 522-2221		
Application Contact					
Name:	Title:		E-Mail Address: Phone:		Phone:
Troy Robertson	CEO		trobertson@armsofhope.o rg		(830) 522-2221
Previous Najim Funding	5		1 -		I
Year			Funding \$		
2016			\$14,000		
2017			\$50,000		
2018			\$75,000		
2019			\$75,000		
Total			\$214,000		
Has the organization ap	plied to tl	ne Najim Charita	ble Foundation i	n the past	and been declined?
Yes 2011 - \$30,240					
Grant Amount Requested \$: Tot		Total Project Bu	Total Project Budget \$:		zation's Annual budget \$
\$75,000		\$300,000		\$8,300,000	
Mission Statement:					

## **Mission Statement:**

To transform the lives of disadvantaged children, youth and families by providing hope and support in a nurturing, Christian environment.

# **PROJECT INFORMATION**

#### **Program / Project Title:**

To support the Living Well Initiative which provides counseling and medical treatment for the growing number of children residing at the Arms of Hope Medina Campus.

PROJECT TIMELINE		
Start Date	End Date	
04/01/2021	12/31/2021	
Harvey F. Najim Charitable Foundation Priorities:		

Child Abuse & Child Neglect

### **Program / Project Description:**

Arms of Hope is currently providing medical and counseling services for approximately 120 children on our Medina Campus (an increase of 8% from last year due to increase in campus population). A majority of the residents come from the San Antonio area. These resources are made available through The Living Well Initiative that was created to meet the financial demand for those in extreme poverty in providing critical medical and mental health treatment and resources.

100% of the children we serve in our single-mother program were homeless prior to placement and over 90% of all our residents have experienced physical, emotional or sexual abuse, neglect and human trafficking. Based of the understanding that our children have a history of extreme physical and emotional trauma, medical and mental health treatment is absolutely critical in their healing process. Arms of Hope recognizes how life saving it is to address the physical and emotional distress preventing these individuals from reaching their potential and having hope filled lives.

Medical and mental health services significantly increase the likelihood that these individuals develop the coping skills and the positive mindset needed to make quality decisions leading to healthy lifestyles and becoming positive citizens in society. The children we serve have only known poverty, homelessness and extreme neglect and, therefore, do not have the resources and foundation to acquire these services on their own. Funds designated to this program will pay for Licensed Professional Counselors to provide assessments and therapy sessions. Counseling is provided to residents on a weekly basis. It will also subsidize the cost of medication and transportation to and from medical appointments (the closest town for services is 25 miles away). The program objective is to match 100% of program residents with qualified counselors within the first 30 days of their care. The measure of success will be 70%-85% of our program participants showing noticeable improvement (as determined by the resident, counselor and entire Social Services team) within the first 12 months of participation in the Living Well Initiative based on a detailed plan of service.

#### **Evaluation Plan:**

Residents will be matched with Licensed Professional Counselors with a specific and detailed long term treatment plan. Providers will be evaluated for effectiveness and quality of treatment twice a year by requiring each resident to complete an evaluation of the counselor and by obtaining feedback from the provider. Also, every residents' mental health progress is evaluated regularly by our highly experienced Clinical Director. Medical treatment and transportation occur on an as needed basis and Arms of Hope ensures and requires that all residents get the care they need for medical and dental needs. Monthly progress reports for medical and emotional health are submitted to the Clinical Director by case managers and counselors.

#### Plans to sustain project beyond the term of this request:

Arms of Hope is blessed with a robust and diversified development program with 33% of our revenue coming from individuals and businesses, 11% from generous private foundations, 7% from churches and 27% from Thrift clothing donations. We will continue to aggressively pursue and enhance all of these areas to continue helping those in desperate need of our services with invaluable programs such as The Living Well Initiative.

Children Impacted:	
How many unduplicated children will the TOTAL PROJECT INITIATIVE impact?	How many unduplicated children will NCF REQUESTED FUNDS impact?
120	34

Please provide the percentage of each group below that will be served by the project in which funds are being requested. Do not leave any area blank. If that specific group will not be served, include zero. The percentage should total 100%.

zero. The percentage sh		100 /0.			
A. Populat	ion Served	Age	B. Pop	oulation S	erved Ethnicity
Infants (0-5)	21%		African America	n	17%
Children (6-13)	33%		Asian American		0%
Young Adults (14-18)	46%		Caucasian		41%
TOTAL:	TOTAL: 100%		Hispanic/Latino		42%
			Native American	l	0%
			Other and Define	e	0%
			TOTAL:		100%
City Council District fo	r Which (	Children are Being	g Served:		
Outside San Antonio					
Counties applicant is in	:				
Bandera, Bexar, Kerr					
Line item Budget:					
Line Item Description		Total Project Funds Allocation		Najim Funds Allocation	
Counseling, Psychological Evaluations, Clinical Director		\$200,000		\$50,000	
Medical (transportation, dental, pharmaceutical, doctor visits)		\$100,000		\$25,000	
TOTAL:		\$300,000		\$75,000	
<b>OTHER FUNDING</b>	RESOU	RCES			
For Project being Requ	ested: Fur	nding sources and	amounts, pendir	ng and co	mmitted.
<b>PROJECT - PENDING</b>	r				
Funder Name			Amount Reques	ted	
Baptist Health Foundation	on		\$75,000		
TOTAL:			\$75,000		
<b>PROJECT - COMMIT</b>			φ12,000		
	TED		472,000		
Funder Name	TED		Amount Reques	ted	
	TED			ted	
Funder Name	TED		Amount Reques	ited	
<b>Funder Name</b> Ed Rachal Foundation		nts, pending and o	<b>Amount Reques</b> \$50,000 <b>\$50,000</b>		his request.
Funder Name Ed Rachal Foundation TOTAL:	and amou		Amount Reques \$50,000 <b>\$50,000</b> committed not sp		his request.
Funder Name Ed Rachal Foundation TOTAL: Other funding sources	and amou		Amount Reques \$50,000 <b>\$50,000</b> committed not sp	ecific to t	his request.
Funder Name Ed Rachal Foundation TOTAL: Other funding sources a ALL OTHER ORGAN	and amou		Amount Reques \$50,000 \$50,000 committed not sp ENDING	ecific to t	his request.
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Funder Name Ed Rachal Foundation TOTAL: Other funding sources a ALL OTHER ORGAN Funder Name *None Provided*	and amou IZATION	REQUESTS - PI	Amount Reques \$50,000 \$50,000 committed not sp ENDING Amount Reques \$0 <b>\$0</b>	ecific to t	his request.
Funder Name Ed Rachal Foundation TOTAL: Other funding sources a ALL OTHER ORGAN Funder Name *None Provided* TOTAL:	and amou IZATION	REQUESTS - PI	Amount Reques \$50,000 \$50,000 committed not sp ENDING Amount Reques \$0 <b>\$0</b>	ecific to t	his request.

Wolf Mountain	\$65,000
Don Dennis	\$50,000
Jerry Cox	\$200,000
TOTAL:	\$415,000

# **BOARD OF DIRECTORS**

What percentage of your board contributes financially to the organization?

100%

#### If Board giving is not at 100%, please explain why?

N/A

#### How are board members expected to participate in your organization?

Financially (10% of our entire budget is generously given by our Board), volunteer time, bi-annual board meetings, fill fundraising events, serve on multiple committees to help oversee organization, pro bono services.

LIST OF BOARD DIRECTORS		
Name & Office Held	Corporate Affiliation	
Jerry Cox, Chairperson	Cox & Perkins Oil and Gas, Texas A&M Board	
Mike Calvert, Executive Committee	Mike Calvert Toyota	
Scot Foith, Executive Committee	Freedom Truck Finance and High Gate Investments	
Lauren Fisher (Honorary)	Valero	
Bruce Barnard	BDI Insurance, Former Mayor of Universal City	
Jerry Browder	Signet Health	
Tom Winkler	Medical Doctor	
Dale Harbison	Texas Instruments	
Kevin McDonald	Nextier Oil/Gas	
Beth Walker	Newhouse & Noble	
Jana Woelfel	Strasburger & Price	
Signature		
Troy Robertson		