



KC-15

ARP Application - Kanawha County

Status: Active

Date Created: Aug 18, 2021

Applicant

Octavia Cordon
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Charleston, West Virginia 25302
3043152928

Certification

Digital Signature

Octavia Cordon
08/11/2021

Contact Information

Organization Name

Aspire Project Achievement

Address

1506 Kanawha Blvd W. Charleston WV 25302

Website (if applicable)

www.aspireachievementproject.org

Phone Number

3043152928

Email Address

aspireprojectwv@gmail.com

Project Summary

1. Brief description of the proposal

Aspire Cares packages are essential supplies students need while away at college. These packages help offset the cost and burden students ensure during their time pursuing their education. In addition to packages, students will take part in monthly checkin webinars for support and wellness checks.

2. Purpose and key anticipated outcomes

Help students cope during the pandemic while away at school.

3. Individuals or communities served

College Students - All counties in West Virginia

4. How the COVID-19 pandemic has necessitated this request

We normally receive donations from the community but haven't been able to receive due to others being directly affected by COVID. Donations have gone down.

5. Amount of funding requested

5,000

7a. Amount of matching funds raised or committed by your organization

1,000

7b. Source of matching funds raised or committed by your organization

Donations

8. How ARP funds, if awarded, will be used

School supplies, dorm essentials, food, travel and postage.

9. How long it will take you to complete the project if awarded funding

2 months

Proposal Details

1. Please describe the problem or need which your project seeks to address

Providing emotional and social support to students while away from college. Students go through depression while away from home. Having a support system locally helps with that while decreasing the chances of students quitting.

2. Please describe goals and expected outcomes of your proposal.

Our goal is to help students pursue their dreams and provide the support along the way.

3. Please provide your project timeline

12 months

4. Please provide your project's total proposed budget.

5000

5. Please list any partners in this proposal, and the partner's role and your relationship with them.

AKA College Application Program - Partner is providing supplies and resources to students.

6. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted.

Donations and applying for additional grants

Organization Information

1. Please provide your organization's mission statement.

ASPIRE's mission is to effect social and economic change in the lives of at-risk youth and their communities by implementing preventive actions. This is done through personal development programming that increases their exposure to enrichment opportunities and decreases at-risk behaviors that lead to drug abuse, incarceration, teen suicide, and economic instability.

2. Describe the history of your organization, tell us about your current programs and activities

Aspire was started back in 2018. We provide coaching/consultation to students and families, community engagement and educational opportunities connections.

3. Please describe three significant accomplishments of your organization.

We hosted 3 annual Youth Opportunity Fairs over the past years. We have launched our first Senior Celebration for High School Seniors providing post graduate opportunities to students upon graduation. We provide essential packages to students no question ask in state and out of state.

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:

Octavia Cordon, Owner; Christa Robinson, Secretary; Eddie Whitehead, Advisor; Freda Harmon, Advisor

5. Please list the staff involved with this project and describe their roles and responsibilities:

Octavia Cordon and Christa Robinson and Azelah Cordon

Current operating budget



SAspire Organizational-Operating-Budget 2
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7. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Kanawha County, please list the amount, nature of the project(s) and current status of the funding and project(s).

Sisters of St. Joseph Heath and Wellness Foundation \$5,000

8. If you have made an application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.

N/A

Impact of the COVID-19 Pandemic

1. Please explain the impact of the COVID-19 pandemic and how it relates to your request.

Community of students are suffering as well as the families and also will give some sense of hope during this time.

2. How will ARP funding, if awarded, aid in the recovery from the COVID-19 pandemic?

It will help offset the cost people are enduring during this time and will help them recovery a little bit during this time.

3. Are you requesting lost revenue due to COVID-19

No

Supplementary Information

1. Please enter contact information (name, email, and phone) for at least one third-party reference.

Tiffany Williams tiffany.ellis-williams@wvstateu.edu 3047201403

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc) which you feel will be essential to the County's review.



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