



U.S. Department of Justice

Office of Justice Programs

Community Capacity Development Office

Government Performance and Results Act (GPRA) Report



unless otherwise specified, data are for calendar year (Jan.-Dec.) 2006

The FY2007 GPRA report submission dates are -- Continuation Sites - May 31; Competitive Sites -May 31; and all other local sites - May 31. For assistance with this form, see attached instructions or contact the JRSA Weed and Seed Project staff at (202) 842-9330. Attachments (including maps) should be clearly identified as to which site, section and question they are submitted as a response and faxed to JRSA at (202) 842-9329. Completed forms should be submitted electronically via this form or faxed to (202) 842-9329.

CCDO Site ID (3 digit #): 5 | 2 | 4 State: NC County/City: Mecklenburg

Site Name: Central Avenue Corridor

Agency Name: City of Charlotte

Person Completing This Form: Marcia Toussaint Title: Site Coordinator

Phone: (7 0 4) 3 3 6 8 4 0 8 Fax: (7 0 4) 3 3 6 8 5 5 8 Email: mtoussaint@ci.charlotte.nc.us

Date Submitted: 0 5/2 5/0 7 Reporting Agency (check one): Federal State Local Tribal

PART I - GRANTEE SITE PERFORMANCE DATA

SECTION A - Law Enforcement/Prosecution Data

1a. Please report the specified crime data for every year that your site has operated since the year of strategy implementation and two years prior. Additional crime data for the same time period that reflects your site's strategy, e.g., domestic violence offenses, truancy, or vandalism can also be reported.

Indicate year that site strategy was implemented: 2005

Table with columns: Crime Data (total number), Geographic Area, and Calendar Years (Jan. - Dec.) from -2 to +4. Rows include homicide, robbery, aggravated assault, burglary, weapons offenses, drug arrests, and other offenses.





Community Capacity Development Office  
**Government Performance and Results Act (GPRA) Report**  
 Page 4 of 7

- 10a. Please attach a copy of the site's current boundaries.  
 b. Have the designated area boundaries changed? **(All changes must have CCDO approval.)**  yes  no  
 c. If "yes", attach a narrative description of the affected boundaries, e.g., street names, land features, or city/county jurisdictional limits.
- 11a. Does your site's designated area include more than one jurisdiction such as multiple cities or counties?  yes  no  planned  
 If "yes",  
 b. Is there formal coordination across these jurisdictions?  yes  no  planned  
 c. Are there also site-specific steering committees for each jurisdiction?  yes  no  planned

**SECTION D - Prevention, Intervention, and Treatment**

The following questions refer to Safe Haven facilities as defined in the attached GPRA Instructions and CCDO Weed and Seed Implementation Manual.

1a. Number of Safe Haven facilities: 02      1b. Number of Safe Havens receiving CCDO funding: 02

2. List names and complete addresses for all Safe Haven facilities (attach additional pages if necessary):

Facility Name	Street Address	City/State/Zip Code		
EPIC International Center	2633 Eastway Drive	Charlotte	NC	28205
Briar Creek Corporation	1451 Briar Creek Road	Charlotte	NC	28205

3. Please indicate the types of activities/services provided as part of the site's Seeding effort. See attached Instructions for help in completing this response.

Seeding Activities/Services Provided	Status	Funding Sources	Seeding Activities/Services Provided	Status	Funding Sources
a. academic courses and tutoring	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	<input checked="" type="checkbox"/> P <input type="checkbox"/> O	m. scouting programs	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O
b. mentoring	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O	n. military cadet training	Y <input checked="" type="checkbox"/> P	W P O
c. Drug Education for Youth (DEFY)	Y <input checked="" type="checkbox"/> P	W P O	o. anti-gang education/ training	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O
d. school violence prevention	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O	p. Communities in Schools programs	Y <input checked="" type="checkbox"/> P	W P O
e. dispute resolution and mediation	Y <input checked="" type="checkbox"/> P	W P O	q. performance/applied arts programs	Y N <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> P O
f. recreation/athletics	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O	r. victim assistance programs	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O
g. job training	Y N <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> P O	s. general health screening services	Y <input checked="" type="checkbox"/> P	W P O
h. job placement	Y N <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> P O	t. lead poisoning screening service	Y <input checked="" type="checkbox"/> P	W P O
i. anti-drug education	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	<input checked="" type="checkbox"/> P O	u. other, specify:	Y <input checked="" type="checkbox"/> P	W P O
j. summer day camp	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O			
k. youth leadership training	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O			
l. Boys/Girls Club programs	<input checked="" type="checkbox"/> N <input type="checkbox"/> P	W <input checked="" type="checkbox"/> O			

Community Capacity Development Office  
**Government Performance and Results Act (GPRA) Report**  
 Page 5 of 7

4a. Is there an offender reentry program that serves the site's designated area? yes no planned

4b. Does the site directly coordinate activities with that program? yes no

5. Provide the total unduplicated Safe Haven attendance (i.e., number of persons receiving services and not visits or sessions attended) for all services/activities during one typical week (see instructions for additional guidance)

Safe Haven attendance for week of 05/07/07 (mm/dd/yy) : 200

6. Please attach any additional data or reports that provide indicators of your site's major focus or Safe Haven-related efforts. If any attachments are responses to this question, please identify them as such.

**SECTION E - Neighborhood Restoration Information**

1a. Number of community development corporations within designated site area: 03

1b. Number of community development corporations that site coordinates activities with: 01

2. Describe the neighborhood restoration projects from the site's most recent grant application that were done.

Neighborhood Restoration Projects	Funding Sources
<b>a. Community Economic Development Activities</b>	
i.	W P O
ii.	W P O
iii.	W P O
<b>b. Job Training &amp; Employment Opportunities for Residents Activities</b>	
i. Pre-employability & work maturity skills workshop	W <del>X</del> O
ii.	W P O
iii.	W P O
<b>c. Small Business Development Activities</b>	
i.	W P O
ii.	W P O
iii.	W P O
<b>d. Improved Housing Conditions Activities</b>	
i.	W P O
ii.	W P O
iii.	W P O
<b>e. Beautification/Physical Environment Cleanup Activities</b>	
i.	W P O
ii.	W P O
iii.	W P O

3. Are any activities related to or otherwise involved in the EPA Brownfields Program? yes no planned

**SECTION F - Coordinated and Leveraged Non-CCDO Weed and Seed Resources**

Identify coordinated and leveraged resources (excluding funding from CCDO). This is defined as those funds that explicitly help, in whole or part, to implement the Weed and Seed strategy. Please estimate the amounts that are being expended for your site. Circle "W" for primarily funding Weeding activities or "S" for primarily Seeding activities. In the last two columns, indicate whether you helped to obtain that funding and/or coordinated with the activity's implementation. (See Forms Instructions for more help; attach additional sheets as needed.)

Types of Non-CCDO Support	Source (Agency/ Assistance Program)	Amounts Received in 2006	Weeding or Seeding (select one)	involvement	
				helped to obtain	coordinate with
<b>1. Other U.S. Department of Justice Funding</b>					
a. direct DOJ grants, e.g., OJJDP Drug-Free Communities Grants			W S	Y N	Y N
			W S	Y N	Y N
b. COPS Office grants			W S	Y N	Y N
			W S	Y N	Y N
c. formula and block grants, e.g., BJA Justice Assistance Grants (JAG)			W S	Y N	Y N
			W S	Y N	Y N
d. other DOJ grants/support			W S	Y N	Y N
			W S	Y N	Y N
			W S	Y N	Y N
<b>2. Other Federal Funding</b>					
a. HIDTA			W S	Y N	Y N
b. other, e.g., HUD HOPE VI grants			W S	Y N	Y N
			W S	Y N	Y N
			W S	Y N	Y N
<b>3. Non-Federal Funding Sources</b>					
a. state government funding			W S	Y N	Y N
			W S	Y N	Y N
b. local government funding	City of Charlotte	16,596.00	W <del>S</del>	<del>Y</del> N	<del>Y</del> N
			W S	Y N	Y N
c. Non-profits, e.g., United Way, foundations, churches			W S	Y N	Y N
			W S	Y N	Y N
d. For-profits, e.g., companies, banks			W S	Y N	Y N
			W S	Y N	Y N
			W S	Y N	Y N
e. other			W S	Y N	Y N
			W S	Y N	Y N
			W S	Y N	Y N
<b>4. Total Funding from All Non-CCDO Funding Sources</b>		16,596.00			

**SECTION F - Coordinated and Leveraged Non-CCDO Weed and Seed Resources (cont'd)**

5. In-kind Contributions - In addition to direct grants and other forms of financial support, Weed and Seed sites often receive in-kind contributions which may include donated services, goods, or use of facilities and equipment. This type of donations can be a significant source of support for a local site. Please indicate these for your site. **(See Forms Instructions for more help on determining in-kind contributions and estimating value; attach additional sheets as needed.** If any attachments are responses to this question, please identify them as such.)

Type of In-Kind Contribution	Estimated Total Dollar Value
a. staff/professional services (other volunteers should be reported in the "other" category below)	
b. office space, other facilities, and/or equipment	5,000.00
c. services such as printing, transportation, or construction	
d. consumables for program activities, e.g., food, paper, or other materials	
e. other (describe): Charlotte Mecklenburg Police Department received inkind donation of rental vehicles. These vehicles were used in patrolling the designated site area.	50,000.00

**SECTION G - Explanatory Notes/Comments**

Please include any additional information that would help in reviewing your report. Please note any data items for which estimations have been calculated and the methods used (see report form instructions for acceptable estimation methods). If any attachments are responses to this question, please identify them as such.