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COMPLETE

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Page 3: External Organization Profile

Q1 County: Essex

Q2 Contact Information: Enter N/A if not applicable.

Name of Organization: FOCUS Hispanic Center for Community Development, Inc.
Contact Person: Maritza Arauz
Title: Executive Director
Address 1: 441-443 Broad Street
Address 2: N/A
City: Newark, NJ
Zip: 07102
Phone Number: 973-624-3234
Fax: 973-624-6450
Email Address: marauz@focus411.org
Website: www.focus411.org

Q3 By checking each of the boxes below, you are certifying that all information contained within them is accurate. *Please note that the NJDOE will verify good standing status using the debarred vendor list when the Profile is submitted and periodically thereafter.

I certify this is a nonprofit organization in good standing with the State of New Jersey and not included on any state or federal debarred vendor list.

Q4 1. Please select your organization's years of experience in operating or delivering services to out-of-school time (OST) programs and activities:

16 years or more

Q5 2. Please list the professional organization (e.g., National Afterschool Association, Professional Impact of New Jersey, New Jersey School Age Child Care Coalition, etc.) of which any of your staff are members, if applicable.

Professional Impact

2017 ESSA External Organization Online Profile

Q6 3. Please indicate the total number of staff in your organization.

52

Q7 4. Please indicate the number of staff members with experience in out-of-school time programs.

25

Q8 5. Please select the demographic area where your organization has experience (check all that apply).

Urban

Q9 a. Programming and Activities - Number of Years

Academic Enrichment	35
Art, Music, Media, and Drama	35
Civic Engagement and Service-Learning	15
Financial Literacy	15
Environmental Literacy	5
Project-Based Learning	15
Science, Technology, Engineering, Math	14
Sports and Recreation	35
Summer Programming	35
Workforce Development	15

Q10 b. Development and Empowerment - Number of Years

Adolescent and Youth Culture	12
Child and Adolescent Development	15
Personal Development and Life Skills	12
Positive Youth Development	25

Q11 c. Human Relationships - Number of Years

Behavior Guidance and Classroom Management	15
Communicating Effectively with Staff, Students, and Families	15
Positive Discipline Techniques	15
Social and Emotional Learning	25

Q12 d. Health, Wellness, Safety, and Nutrition - Number of Years

Fitness and Nutrition	35
Indoor and Outdoor Environments	35
Physical Health and Wellness	35
Program Safety	35

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Q13 e. Cultural Competence and Inclusion - Number of Years	Children in Poverty	35	
	Learning Differences	15	
	Race, Gender, and Sexual Identity	15	
	Students with Disabilities	15	
	Undocumented Newcomers	35	
Q14 f. Engaging Families, Schools, and Communities - Number of Years	Coordination and Linkages of Resources	35	
	Connecting to Schools	35	
	Creating Community Partnerships	35	
	Engaging Parents and Families	35	
	Homeless and Migrant Populations	35	
Q15 g. Quality Programming - Number of Years	Action Planning	15	
	Coaching and Mentoring	15	
	Logic Models and Outcomes Measurement	15	
	Program Design	35	
	Quality Assessments and Surveys	15	
	Research and Evaluation	25	
Q16 h. Management and Administration - Number of Years	Advocacy and Policy	15	
	Budgeting and Fiscal Management	35	
	Fundraising and Development	15	
	Human Resources and Supervision	35	
	Marketing and Promotion	35	
	Program Management	35	
	Recruitment and Retention	35	
	Regulations and Licensing	35	
	Utilizing Technology and Social Media	20	
	Volunteers and Volunteer Management	15	

Q17 Please upload one of the following documents that demonstrates that your agency is a nonprofit organization in the State of New Jersey: 1) Proof that the Internal Revenue Service currently recognizes the agency as an organization to which contributions are tax deductible under Section 501(c)(3) of the Internal Revenue Code;2) A statement from a State taxing body or the State attorney general certifying that: –The organization is a nonprofit organization operating within the State; and –No part of its net earnings may lawfully benefit any private shareholder or individual;3) A certified copy of the agency’s certificate of incorporation or similar document if it clearly establishes the nonprofit status of the agency; or,4) Any item described in paragraphs (1) through (3) if that item applies to a State or national parent organization, together with a statement by the State or parent organization that the applicant is a local nonprofit affiliate.

IRS 501(C)(3)-FOCUS.pdf (103.9KB)

Q18 Submission of External Organization Profile

By checking the box, you are certifying that you have read and understood all necessary requirements, that your organization meets the criteria outlined, and that you have completed all sections of this form, including the uploading of requested non-profit documentation.