

For ALOM use only

Application Received Date: \_\_\_\_\_ Program Requirement Review Date: \_\_\_\_\_



## 2018 BANNER COMMUNITY PROGRAM APPLICATION

---

### Contact Information

Please list the name, email and phone number of your Banner Community Application contact person.

*Municipality:* \_\_\_\_\_ *Email:* \_\_\_\_\_

*Contact Name:* \_\_\_\_\_ *Phone:* \_\_\_\_\_

---

### SECTION I – INTERGOVERNMENTAL COOPERATION

**Be an active member in good standing – ALOM, County Association and Council of Governments:**

#### Part A

Appoints a Delegate to serve as liaison to County Association (ALOM, Association of Township Officials, Boroughs Association, Allegheny County/Western Pennsylvania Association of Township Commissioners, etc.)

*Delegate Name:* \_\_\_\_\_

*Name of Association:* \_\_\_\_\_

#### Part B

Appoints a Delegate to serve as representative to - and regularly attend meetings of - the affiliated Council of Governments:

*Delegate Name:* \_\_\_\_\_

*Name of COG:* \_\_\_\_\_

Participate in Joint Purchasing Program \_\_\_\_\_ *Yes; Name of Program:* \_\_\_\_\_

Participate in a shared service/initiative \_\_\_\_\_ *Yes; Name of Service:* \_\_\_\_\_

**SECTION II – PROFESSIONAL DEVELOPMENT**

**PART A**

Send **at least one** representative to the ALOM Annual Spring Educational Conference:

Attended 2017 Spring Conference *Attendee Name:* \_\_\_\_\_ and/or  
Commitment to attend 2018 Spring Conference \_\_\_\_ Yes *Attendee Name:* \_\_\_\_\_

**PART B**

Participate in **two or more** of the following professional development opportunities:

Graduated from or enrolled in the upcoming Local Government Academy Newly Elected Officials Course, or participated in another training offered via the Local Government Academy Course Catalog:

*Attendee Name:* \_\_\_\_\_ *Program Description:* \_\_\_\_\_ *Date:* \_\_\_\_\_

Attend the Allegheny County & Western Pennsylvania Association of Township Commissioners Fall Conference. *Attendee Name:* \_\_\_\_\_

Attend a municipal educational conference or training event sponsored by a Pennsylvania State Municipal Association:

*Attendee Name:* \_\_\_\_\_ *Program Description:* \_\_\_\_\_ *Date:* \_\_\_\_\_

Attend a educational training focused on local government and sponsored by a Pennsylvania State Agency (DCED, PennDOT, DEP, etc.)

*Attendee Name:* \_\_\_\_\_ *Name of Department:* \_\_\_\_\_

*Program Description:* \_\_\_\_\_ *Date:* \_\_\_\_\_

Participate in another municipal training program sponsored by another local government organization or related entity:

*Attendee Name:* \_\_\_\_\_ *Name of Organization:* \_\_\_\_\_

*Program Description:* \_\_\_\_\_ *Date:* \_\_\_\_\_

### **SECTION III – COMPREHENSIVE PLANNING AND ANALYSIS**

**Implement sustainable governing practices by completing three or more of the following:**

Earned certification or pledged to become certified via Sustainable Pennsylvania Community Certification *Yes* \_\_\_\_

Employee Pension Funding Ratio 80% plus: *Non-Uniform* \_\_\_\_% and/or *Uniform* \_\_\_\_%  
(*Verification per Actuarial Valuations submissions under Act 205*)

Participate in ALOM 2017 Compensation and Benefits Survey: *Yes* \_\_\_\_

Maintain an updated Comprehensive Plan: *Yes* \_\_\_\_

**Plan Adoption Date** \_\_\_\_\_

Participate in *Allegheny Places* Planning Program. *Yes* \_\_\_\_  
(*Will be confirmed by ACED*). Visit Website/Details <http://www.alleghenyplaces.com>

**Partner with Allegheny County (or municipality Home County) to engage in joint programming** (*examples include, but are not limited to; Main Street Program, Recycling/Yard Waste, Vacant Property, Open Streets, Live Well Allegheny, Multi-Municipal Planning*)  
*Yes* \_\_\_\_ *Name of Program* \_\_\_\_\_

### **SECTION IV – EMERGENCY PREPAREDNESS**

**Municipality completes essential requirements to ensure the Health, Safety and Welfare of the community.**

Drafts and maintains an Emergency Operations Manual outlining procedures for responding to a disaster. Manual must be regularly updated and submitted to county Emergency Management Agency \_\_\_\_ *Yes*

Municipality has appointed an Emergency Management Coordinator who has completed training and education courses as required. \_\_\_\_ *Yes*

Municipality is compliant with Federal NIMS Guidelines, ensuring all required training has been administered to appropriate personnel. \_\_\_\_ *Yes*

**SECTION V – COMMUNICATIONS AND COMMUNITY OUTREACH**

Engages community stakeholders by conducting an effective and sustained communications program

**PART A**

Create and distribute a Municipal Newsletter, Annual Report or special purpose publication either in print or online: \_\_\_\_\_ Yes (Attach newsletter and/or provide web links)

**PART B**

Work with school district stakeholders to accomplish one of more of the following:

Establishes a joint program or initiative:  
(Eagle Scout Project, Junior Council, Dare Program, etc.)

Program Name: \_\_\_\_\_  
Participant Name(s): \_\_\_\_\_ (Municipality)  
Participant Name(s): \_\_\_\_\_ (School)  
Name of School: \_\_\_\_\_

Participates in a School Class Discussion/Career Day about local government:  
Participant Name: \_\_\_\_\_ Program Description: \_\_\_\_\_ Date: \_\_\_\_\_

**PART C**

Highlights the good work being done at the local level by completing two or more of the following:

Hosts a Community Day Celebration/Festival for residents  
\_\_\_\_\_ Yes; Date \_\_\_\_\_

Pass a Proclamation/Resolution in support of Local Government Week  
\_\_\_\_\_ Yes; Date \_\_\_\_\_ Attach Resolution  
\* Local Government Week is usually held in Pennsylvania during the 2<sup>nd</sup> week of April

Letter to the Editor or Communication to residents that promotes local government  
\_\_\_\_\_ Yes; Attach/Describe \_\_\_\_\_

Serves as representative to a Civic Group on behalf of municipality and/or attends a civic group meeting to educate attendees on local government operations, news or achievements.  
\_\_\_\_\_ Yes; Participant Name: \_\_\_\_\_ Name of Civic Group \_\_\_\_\_