

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

HEALTHCARE ASSOCIATION OF NEW YORK STATE  
1 EMPIRE DRIVE  
RENSSELAER, NEW YORK 12144  
(518) 431–7658

**Name of Project Director:**

CATHY CICCONE

**Purpose of Project:**

FUNDS WILL BE USED TO DEVELOP AND DISSEMINATE INFORMATION AND TOOLS TO ASSIST NEW YORK STATE HOSPITALS IN IMPROVING QUALITY OF CARE AND PATIENT SAFETY FOR ALL PATIENTS.

**Funded Amount:**

\$175,000

**Requested By:**

WEINSTEIN

**Name of Administering State Agency:**

DEPARTMENT OF HEALTH

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

BLUE POINT COMMUNITY CIVIC ASSOCIATION  
P.O. BOX 231  
BLUE POINT, NY 11763  
(631) 363–2723

**Name of Project Director:**

MATTHEW JURAN

**Purpose of Project:**

FUNDS WILL BE USED TOWARD BEAUTIFICATION EFFORTS OF THE ASSOCIATION, INCLUDING THE REPAIR AND/OR REPLACEMENT OF SIDEWALKS, PLANTERS, PLANTINGS, TREES, WASTE RECEPTACLES AND SIGNAGE.

**Funded Amount:**

\$5,000

**Requested By:**

EDDINGTON

**Name of Administering State Agency:**

DEPARTMENT OF STATE

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

BARD COLLEGE  
P.O. BOX 5000  
ANNANDALE, NY 12054  
(212) 995–8479

**Name of Project Director:**

MARTHA OLSON

**Purpose of Project:**

FUNDS WILL BE USED TO OFFSET THE COSTS OF STUDENT SUPPORT PROGRAMS, INCLUDING THE EARLY COLLEGE PROGRAM THAT SUPPORTS STUDENTS' ABILITY TO ENGAGE SUCCESSFULLY IN COLLEGE LEVEL MATH AND SCIENCE CURRICULUM.

**Funded Amount:**

\$200,000

**Requested By:**

NOLAN, SILVER

**Name of Administering State Agency:**

EDUCATION DEPARTMENT

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

ROCKAWAY WATERFRONT ALLIANCE  
P.O. BOX 900645  
FAR ROCKAWAY, NY 11690–0645  
(718) 327–5919

**Name of Project Director:**

JEANNE DUPONT

**Purpose of Project:**

FUNDS WILL BE USED TO HELP DEFRAY ADMINISTRATIVE COSTS  
ASSOCIATED WITH IMPLEMENTING ENVIRONMENTAL SCHOOL WORKSHOPS  
AND EARTH DAY ROCKAWAY.

**Funded Amount:**

\$1,500

**Requested By:**

PHEFFER

**Name of Administering State Agency:**

EDUCATION DEPARTMENT

*(Revised)*

SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

TONAWANDA'S COUNCIL ON THE ARTS  
240 GOUNDRY STREET  
NORTH TONAWANDA, NY 14120  
(716) 694–4400

**Name of Project Director:**

ELLEN RYAN, EXECUTIVE DIRECTOR

**Purpose of Project:**

FUNDS WILL BE USED TO SUPPORT THE CHILDREN'S ART EDUCATION PROGRAM AND THE PROFESSIONAL DEVELOPMENT PROGRAM FOR ARTISTS AND ARTS ORGANIZATIONS OFFERED AT THE CARNEGIE ART CENTER.

**Funded Amount:**

\$25,100

**Requested By:**

DELMONTE, GABRYSZAK, HOYT, PARMENT, PEOPLES, SCHIMMINGER,  
SCHROEDER

**Name of Administering State Agency:**

EDUCATION DEPARTMENT

*(Revised)*

SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

HAMMELS SENIOR CENTER/UNITED IRISH FOUNDATION  
90–01 ROCKAWAY BEACH BLVD.  
ROCKAWAY BEACH, NY 11693  
(718) 634–4047

**Name of Project Director:**

JANET BRADY, DIRECTOR

**Purpose of Project:**

FUNDS WILL BE USED TO ENHANCE THE RECREATION, HEALTH AND  
EDUCATION PROGRAMS UTILIZED BY SENIORS AT THE HAMMELS SENIOR  
CENTER AND MEMBERS.

**Funded Amount:**

\$1,500

**Requested By:**

PHEFFER

**Name of Administering State Agency:**

OFFICE FOR THE AGING

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

ULSTER–GREENE ARC FOUNDATION  
471 ALBANY AVENUE  
KINGSTON, NY 12401  
(845) 331–4300 Ext: 228

**Name of Project Director:**

JO GALANTE

**Purpose of Project:**

FUNDS WILL BE USED TO OFFSET COSTS OF WORKFORCE RETENTION AND IMPROVEMENT EFFORTS FOR DIRECT CARE WORKERS IN THE DEVELOPMENTALLY DISABLED CARE INDUSTRY.

**Funded Amount:**

\$300,000

**Requested By:**

CAHILL

**Name of Administering State Agency:**

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

CAPITAL CULTURE, INC.  
C/O CAPITAL REPERTORY THEATRE  
111 N. PEARL STREET, ALBANY, NY 12207  
(518) 462–4531

**Name of Project Director:**

JOHN PRIVITERA

**Purpose of Project:**

FUNDS WILL BE USED TO SUPPORT ARTS AND CULTURE ORGANIZATIONS  
WITHIN THE CAPITAL DISTRICT AREA.

**Funded Amount:**

\$150,000

**Requested By:**

CANESTRARI, MCENENY

**Name of Administering State Agency:**

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION

## SFY 2003–2004 LEGISLATIVE INITIATIVE FORM

**Legal Name, Address, and Telephone Number:**

THREE VILLAGE HISTORICAL SOCIETY  
P.O. BOX 300  
STONY BROOK, NY 11790  
(631) 751–3730

**Name of Project Director:**

PATRICIA KUNDER

**Purpose of Project:**

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES AND COSTS ASSOCIATED WITH PROVIDING EDUCATIONAL PROGRAMS TO THE COMMUNITY.

**Funded Amount:**

\$3,000

**Requested By:**

ENGLEBRIGHT

**Name of Administering State Agency:**

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION