



National Association for Latino Community As... -\$1,250.00

March 21, 2025 . Money Sent

Paid with

World of Hyatt
(VISA Credit
Card x-6516)
You'll see
"PAYPAL
*NALCAB" on
your card
statement.

Ship to

Fatima Sierra Vargas
2540 Nicholson St
Hyattsville, MD 20782
United States

Transaction ID

2WR3366900395871A

Contact info

\$1,250.00 [Message National Association for Latino Community Asset Builders](#)
210-227-1010
events@nalcab.org

Note

Fellowship 2025 Tuition:
Fatima Sierra Vargas,
UnidosUS

Details

Sent to National Association for Latino Community Asset Builders \$1,250.00

Total \$1,250.00

How can we help?

-  Request Cancellation
-  Get Answers
-  Report a problem
-  Contact National Association for Latino Community Asset Builders

If National Association for Latino Community Asset Builders is unable to help, you can file a case in our Resolution Center by September 17, 2025. You may be eligible for [Buyer Protection](#)



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THE NATIONAL ASSOCIATION FOR LATINO COMMUNITY ASSET BUILDERS
(NALCAB)

Participation Agreement

This Participation Agreement (“**Agreement**”) dated as of March 5, 2025 (“**Effective Date**”), is between the NATIONAL ASSOCIATION FOR LATINO COMMUNITY ASSET BUILDERS (“**NALCAB**”) and UnidosUS (“**Organization**”) and together with NALCAB, the “**Parties**” and each individually, a (“**Party**”) agree to the following terms:

1. **Term of Agreement**

NALCAB is pleased to offer personal and professional training through the 2025 NALCAB Pete Garcia Community Economic Development Fellowship to Fatima Sierra Vargas beginning on February 28, 2025, and ending on December 4, 2025 (“**Engagement Period**”) for the purpose of enhancing the development of their organization.

2. **Organization** represents that:

- (a) **Organization** is aware of no conflicts of interest or any other fact, circumstance or condition that would interfere with its ability to comply with the terms of this Agreement. **Organization** will not undertake any other obligations that conflict with **Organization** under this Agreement, without the prior written consent of NALCAB, which shall not be unreasonably withheld.
- (b) **Organization** and its employees are not entitled to receive any benefits that NALCAB may provide to its employees, including but not limited to workers’ compensation benefits, disability benefits, unemployment benefits, paid vacations, paid holidays, pension or retirement benefits, health or other insurance benefits, and any other benefits NALCAB might from time to time provide to its employees.
- (c) **Organization** and its employees will comply with applicable laws, ordinances, and regulations in performing obligations under this Agreement.

3. **General Provisions**

- (a) Other changes to or any waiver of any provision of this Agreement will be enforceable only if mutually agreed to in writing by authorized representatives of NALCAB and NALCAB Member Organization.
- (d) With respect to any reports, data, or information produced by the **Organization** or its third-party contractor in the course of performing this Agreement, NALCAB will have unlimited rights to view and reproduce reports, data and other products delivered by the third-party contractor referenced in this agreement. The provisions of this paragraph shall survive expiration or termination of this Agreement.
- (e) Nothing contained in this Agreement shall be construed to create a joint venture or partnership between the parties. **Organization** is not an agent of NALCAB.

1. **Organization** agrees to indemnify and hold harmless NALCAB, their officers, directors, and employees, and funders, against any loss or damage caused by **Organization** negligent or willful acts or omissions in the performance of this Agreement. The provisions of this paragraph shall survive expiration or termination of this Agreement.
2. **Fellow** agrees that if he/she/they leave the **Organization** during the Fellowship, Fellow agrees to discuss with new organization about remaining travel expenses that they will need to incur. Tuition will not need to be paid as it was paid in full.
3. In order to assure full and complete participation, **Fellow** agrees that while participating in the Pete Garcia Fellowship program, he/she/they will not participate in any other fellowship or leadership program.
 - (f) NALCAB agrees to indemnify and hold harmless **Organization**, its officers, directors, and employees, against any loss or damage caused by NALCAB's negligent or willful acts or omissions in the performance of this Agreement. The provisions of this paragraph shall survive expiration or termination of this Agreement.
 - (g) This Agreement, together with all attachments, will constitute the entire agreement of the parties.

IN WITNESS HEREOF, the parties acknowledge that the **Organization** will be responsible for all program expenses as related to this agreement and committed to full participation in the NALCAB Pete Garcia Community Economic Development Fellowship.

National Association for Latino Community Asset Builders (NALCAB)

DocuSigned by:
 By Natalia Chaves Larkin Date 3/7/2025
95AC55CF441E4D6...
 Natalia Chaves Larkin, Director of
 Training and Leadership Development

Signed by:
 By Holly Frindell Date 3/10/2025
6266F5F0EF43481...
 Holly Frindell, Chief Program Officer

UnidosUS

DocuSigned by:
 By [Signature] Date 3/10/2025
FC50D4C08F98A4BC...
 Laura Arce, Senior Vice President, Economic Initiatives

Attachment A: Scope of Work

NALCAB Pete Garcia Community Economic Development Fellowship

Organization Requirements:

Organization agrees to allow the required travel and time commitment for Fatima Sierra Vargas participation in 4 in-person trainings and 6 online trainings throughout program period. Attendance for in-person trainings and online trainings will be documented. Fellows must attend all in-person trainings and participate in a minimum of 90% of the online trainings to graduate from the NALCAB Pete Garcia Community Economic Development Fellowship. Detailed timeline is in Appendix A.

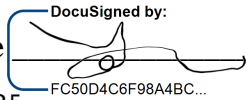
Organization will be responsible of a tuition fee of \$2500 as a Nonprofit Non-Member. The fee will be divided into two installments: the first installment of \$1,250 is due on or before March 28, 2025, and the second installment of \$1,250 is due on or before October 15, 2025. Communicate with NALCAB Staff if payment extension is needed. Payment information is in Appendix B.

Fellow agrees to book transportation and the organization will be responsible for payment for airfare and transportation. NALCAB will be responsible for making hotel reservations, while the organization will be responsible for payment and fellow must stay at the hotel reserved by NALCAB. Fellow also agrees to complete a Community Development Leadership Project that will culminate with a presentation during the final in-person training.

If fellow chooses not to continue the program for any reason, NALCAB must be notified in writing.

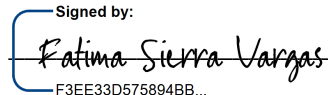
The **Organization** will be responsible for covering all travel expenses including airfare, ground transportation to and from the hotel/airport, and hotel accommodations. NALCAB will provide breakfast and lunch for Fellow during each fellowship training and National Conference. NALCAB will also waive registration for Fellow to attend the 2025 NALCAB National Conference.

ED Printed Name Laura Arce

ED Signature 
FC50D4C6F98A4BC...

Date 3/10/2025

Fellow Printed Name Fatima Sierra Vargas

Fellow Signature 
F3EE33D575894BB...

Date 3/19/2025

NALCAB Pete Garcia Community Economic Development Fellowship Timeline of Activities 2025	
November 15, 2024	Application Opens
November 21, 2024 2 pm CT (1 hr.)	Informational Webinar 1
January 14, 2025 2 pm CT (1 hr.)	Informational Webinar 2
January 26, 2025	Application Closes
February 24-28, 2025	Application Status Notification – Announcement of Pete Garcia Fellows
March 4, 2025 11 am – 12:30 pm CT (1.5 hr.)	Virtual Session 1 – Kick-off Call: Introductions, Overview of NALCAB and Fellowship
April 7-11, 2025 San Juan, Puerto Rico	In-Person Training Session 1
May 22, 2025 11 am – 12:30 pm CT (1.5 hr.)	Virtual Session 2 – Logic Model Peer Review and Q&A
June 26, 2025	Virtual Session 3 – Logic Model Peer Review and Q&A
June 2025	Submit Logic Model Draft
Summer 2025 TBD	In-Person Training Session 2
August 21, 2025 11 am – 12:30 pm CT (1.5 hr.)	Virtual Session 4 – Community Development Project Review and Q&A
August 2025	Work on Community Development Project with Mentor
September 15-17, 2025 Nashville, TN	In-Person Training Session 3 at the 2025 NALCAB National Conference
September 2025	Finalize Community Development Project
October 9, 2025 11 am – 12:30 pm CT (1.5 hr.)	Virtual Session 5 – Logic Model Peer Review and Q&A
November 3-7, 2025 San Antonio, TX	In-Person Training Session 4
December 4, 2025 11 am – 12:30 pm CT (1.5 hr.)	Virtual Session 6 – Fellowship Debrief

Appendix B

Payment Options for Fellowship Tuition Fee

Instructions for PayPal

Paypal Link: [PayPal.Me](https://www.paypal.com)

Note field: Please include description such as “Fellowship 2025 Tuition: Name of Fellow”

Instructions for checks:

1. Check be payable to National Association for Latino Community Asset Builders or NALCAB
2. Memo field: please include description such as “Fellowship 2025 Tuition: Name of Fellow and Organization”
3. Address: check must be mailed to San Antonio Office and addressed to Accounting Dept attention.

Attn: Accounting Dept
NALCAB
5404 Wurzbach Rd.
San Antonio, TX 78238

Professional Development Fund Request Form

USER INSTRUCTIONS

Form Purpose: Use this form to request approval for professional development activities.

How to Complete this Form: Fill out this form, to include manager and component VP signature and submit to HR.

Deadline: This form must be received and approved at least one month in advance of the professional development activity.

Upon Completion of Activity: Submit Certification of Completion or another related document to HR to include in personnel file.

EMPLOYEE INFORMATION

Name: _____

Date: _____

PROFESSIONAL DEVELOPMENT PLAN DETAILS:

Name of training/workshop/conference: _____

Training/workshop/conference Provider: _____

Date(s): _____

Location: _____

Provide details describing objectives, topics, and content that should be covered during this activity.

Explain briefly what you intend to learn or gain (personally and/or professionally) from attending this activity.

How does this training/development relate to your primary role at UnidosUS?

(Managers only) How will your attendance at this activity benefit the staff you supervise or the people you work with?

PROJECTED EXPENDITURE:

Registration cost: _____

APPROVAL:

Employee signature: Fatima Sierra Vargas Date: _____

Manager signature: Laura Arce Date: 2/27/2025

VP signature: Laura Arce Date: 2/27/2025

HR signature: Latia Littlejohn Date: _____

Please note: The Professional Development Fund is subject to annual company budgets established for external trainings and memberships. Expenses up to \$1000 per fiscal year approved by your manager/VP will be covered by HR (CC 1811-10)