**How did you learn about the Piikani Grant Equity Program? (Check all that apply)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Print Adverting |  | Social Media |  | Word of Mouth |  | Business Contact |
|  | Past/Current Client |  | PRDL Website |  | Other Website |  | Other |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Have you previously applied for a small business grant, through the Piikani Grant Equity Program? | | | | | | | | |
| Yes: | |  | | | | | No: |  |
| If you marked yes: | | | | | |  | | |
| Year(s) of application: | | | | | |  | | |
| Business Type: | | | | | |  | | |
| Business Name: | | | | | |  | | |
| Is this business still in existence? If yes, please describe. | | | | | |  | | |
| Have you taken small business training or can demonstrate business knowledge? | | | | | | | | |
| Yes: |  | | No: |  | If yes, please attach certificate, degree, diploma etc. | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you previously been awarded a grant through the Piikani Grant Equity Program? | | | | |
| Yes: |  | | No: |  |
| If you marked yes: | |  | | |
| Year(s) of application: | |  | | |
| Business Type: | |  | | |
| Business Name: | |  | | |

# A. Applicant Information

**Purpose for application for a small business grant:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | New Business |  | Existing Business |  | Business Expansion |  | Youth Entrepreneur |
|  | Elders |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date of Application: | | | | | | |
| Applicant Last Name: | | Middle Initial: | | | First: | |
| Address: | | | City/Town: | | | |
| Province: | Postal Code: | | | Email: | | |
| Phone Number: | | Cell: | | | | Other: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| What is your Business Structure? | | | | | | |
|  | Sole-Proprietorship |  | | Partnership |  | Corporation |
| Is this business located on a First Nation Community? | | | | | | |
|  | Please show proof of BCR.  Yes | |  | Please show proof of Business License.  No |  | Both |
| Business Name: | | | | | | |

# B. Business Information

|  |  |  |
| --- | --- | --- |
| Is the business mailing address the same as the applicants mailing address?  Yes No  If different please indicate: | | |
| Business Phone: | Business Fax: | Website |
| Number of employees: | Full-time: | Part-time: |

# B.1. Business Description

|  |
| --- |
| Tell us about your project (e.g. What products/service will you be offering or are currently offering? What’s your current/ existing target market? Who are your competitors? etc.) |
|  |

*Attach additional supporting documents (e.g. Business Plan, market studies, business studies, and or relevant industry information)*

# B.2. Estimated Project Costs and Financing

*Please provide proof, of any additional commercial financing or additional funding.*

|  |  |
| --- | --- |
| **Piikani Grant Equity Program** | |
| **Grant Request Amount:** |  |

# B.3. Projected Expenses

**NOTE: \*\*\***A quote from each supplier is required to be submitted with the application for the projected expenses, and we encourage the use of an Aboriginal supplier. **\*\*\***

|  |  |  |
| --- | --- | --- |
| PROJECTED EXPENSES FOR THE $5,000 | | |
| Name of Supplier | Description of Expense | Total Expense |
|  |  | $ |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | Total Expenses | $ |

# C. Ownership Information

*List all owners and partners*

|  |  |  |
| --- | --- | --- |
| Full Name | Date of Birth | Ownership |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# C.1. Education and Experience

Attach a resume for each individual identified above. Resume should highlight individual’s education, training, employment history and other experience relevant to the proposed business.

# Documentation Requirements Checklist

Ensure the following documents are submitted with your application or the grant may not be approved.

(√)

|  |  |
| --- | --- |
|  | Business Plan  To include:   * Marketing Plan * Financials |
|  | Proof that the business is owned by a Piikani Nation Member.   * Copy of status card, and where required a copy of the articles of incorporation and partnership agreement. * Copy of BCR * Copy of Business License |
|  | A copy of the projected timeline and budget from beginning to end and milestone dates of the business/project/initiative - If a separate document:  NOTE: A report must be completed and submitted to Piikani Resource Development Ltd. on the business/project/initiative by March 31, 2018. |
|  | Resume of Owner(s) |
|  | Proof the applicant has contributed equity to business |
|  | Copies of quotes from the suppliers. |
|  | A copy of the projected budget - if a separate document. |
|  | Samples of marketing. |

*Incomplete applications cannot be considered, please see a copy of the grant equity guidelines for further information.*

**Acknowledgment & Release**

I,                                            declare that the information on this grant equity application form to the best of my (our) knowledge and belief is true, correct and complete.

|  |  |
| --- | --- |
|  |  |
| Signature | Date |

**Submit complete application to:**

Piikani Resource Development Ltd.

RE: 2017 Grant Equity Program

**Drop Off:** 1835 15th Avenue Brocket, Alberta

**Mail:** P.O. Box 3242 Brocket, Alberta T0K 0H0

**Fax:** (403) 965-2626

**Email:** info@prdl.ca Subject: GEP2017

Complete guidelines and GEP 2018 application form is available on our website at: www.prdl.ca

Contact Kerrisa at (403)965-3092 or by email: info@prdl.ca for our updated training dates.