Jump-Start Accelerator Grant Application

Applicant Name(s):_____

Applicant Address(es):_____

Applicant Phone Number(s):_____

Applicant Email Address(es):_____

Are you 18 years of age or older? (select one): ☐Yes ☐No

Business Name:_____

Business EIN:_____

Will you be offering e-commerce? (select one): ☐Yes ☐No

Planned Business/Customer Hours: _____

Grant Request Amount: _____

If awarded, can CCGP use your project to market the Jump-Start Accelerator Grant?   Yes   No

Additional Startup Funding Source (grants, loans, personal funds, etc.):

_____

_____

Business Status (select one): ☐ New Startup ☐ Relocating Business ☐ Established Business – Expanding Locations

1. Executive summary of project, please include primary use of requested funding, primary goals and implementation objectives: (up to 5 points)

2. What are the specific goals/mission the business seeks to achieve? (up to 5 points)

3. Describe the impact the business will have on the vibrancy of Carroll County and the plans to market the business to the target audience: (up to 5 points)

4. Give your case for support as to why this particular project is unique and worthy of funding: (up to 5 points)

5. Describe how the business will address rural challenges through innovation and creativity: (up to 5 points)

6. Please outline your budget. Describe the need for funding and what you will use the money for, if awarded: (up to 5 points)

7. Provide a detailed timeline of tasks necessary to open/expand your business along with anticipated completion date: (up to 5 points)

8. Describe the number of employees your business will employ short-term and the potential for the future (including yourself). Feel free to refer to the business plan: (up to 5 points)

9. Identify all partners, logistical and financial, including an explanation of roles and responsibilities: (up to 5 points)

<u>Required</u> Documentation Checklist to Accompany Application (please attach):

☐ Project Cost Summary

☐ Business Plan

☐ Business Owner(s) Resume(s)

Optional Document Checklist to Accompany Application:

☐ Letter(s) of Support