

MONTANA INDIAN YOUTH SMALL BUSINESS PROGRAM

APPENDIX A: APPLICATION EXAMPLE

Name of Project *

Enter the name of the project. This will be a unique name that will identify your project and will be referred to in any follow-up correspondence.

Tribe Name *

Enter the name of the eligible tribal government.

Authorized Application Preparer *

Enter the name of the authorized application preparer (first and last name).

Authorized Application Preparer Title *

Enter the title of the authorized application preparer.

Telephone Number *

Enter the phone number of the application preparer. This should be a number that is accessed daily and can accept voicemail messages. Entry example: "(406) 841-2XXX".

Additional Contact Numbers

Enter additional contact phone numbers and their type. For instance, enter "(406) 841-2XXX."

Fax Number

Enter the fax number of the application preparer.

Email Address *

Enter the email address of the application preparer.

Physical Address *

Enter the tribal government's physical location address.

Mailing Address *

Enter the tribal government's mailing address.

City, State, and Zip Code *

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Enter the tribal government's mailing city, state, and zip code.

County *

Enter the county or counties in which the tribal government is located.

State House and Senate Districts *

Enter the state Senate and House districts which represent the tribal government.

Project Location *

Enter the project location(s).

Project Administrator

Enter the name of the entity responsible for administering the program. .

Project Administrator Qualifications * Upload a qualification sheet for the project administrator that demonstrates the capacity of the designated project administrator/organization in administering small business development and/or youth development initiatives.

Amount of Montana Indian Youth Small Business Program Funding Requested *

Enter the total amount of Montana Indian Youth Small Business Program funds requested in this application. A total of \$18,750 can be requested.

\$1,000 of this amount is available for marketing costs

\$1,750 of this amount is available for administrative costs

Upload Tribal Resolution

Upload a tribal resolution or appropriate authorization from the tribal government authorizing application to the Program for Montana Indian Youth Small Business Program funds. The resolution should include the name of the project being applied for, the name of the tribal organization or entity that will be responsible for managing the process and contract and the

Native Youth Qualifications & Internship Process *

Identify the eligibility requirements for Native youth in your community to participate in the program including criteria such as: age, academic standing, code of conduct, location of internship, etc. Also identify the process by which youth will be enrolled in the program, the length of internship, and number of years the program is expected to run.

Business Mentor Qualifications & Matching Process *

Describe how businesses will be identified for participation in the program and how the program will engage businesses to participate in intern host opportunities.

Identify any necessary training or mandatory kick-off sessions that the youth and/or businesses will need to attend.

Marketing/Recruitment Plan

Identify how the program will be marketed to recruit both Native youth and businesses into program participation. Identify if and how the allowed marketing costs will be utilized.

Upload Project Implementation Schedule

Upload a timeline document for when the project activities/scope of work will be started and completed. The Project Implementation Schedule form is located in the guidelines section of this online application.

Upload Project Sources and Uses

Upload a budget will listing all sources and uses of funds for the entire project including cash and in-kind contributions. A Project Sources and Uses Form is located in the guidelines section of this online application.

Scope of Work

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Identify how the program proposal will familiarize youth with small business management skills, foster better understanding and appreciation of small business ownership, facilitate professional communication and customer service skills.

Also identify how the program proposal will leverage the unique perspectives and skill sets of Native youth in small businesses. For example, how can participating youth help businesses to innovate or diversify their operational and promotional activities?

Project Contact *



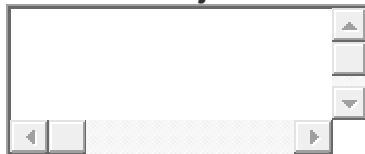
Enter the name, title, and contact information (mailing address, phone number, email address, and fax number) of the main point of contact for this project.

Project Reporting Contact *



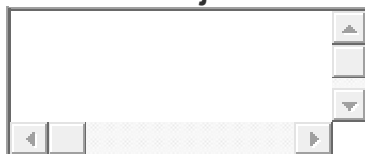
Enter the name, title, and contact information (mailing address, phone number, email address, and fax number) of the project reporting contact.

Alternate Project Contact *



Enter the name, title, and contact information (mailing address, phone number, email address, and fax number) of the alternate project contact.

Financial Project Contact *



Enter the name, title, and contact information (mailing address, phone number, email address, and fax number) of the financial officer assigned to the contact.

Upload Remaining Forms

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Upload any remaining documentation or forms not otherwise uploaded elsewhere in the application. These forms include but are not limited to:

- Designation of Depository Form
- Signature Certification Form
- Request for Payment Form