

BIOSCIENCE INNOVATION GRANT PROGRAM APPLICATION
NORTH DAKOTA DEPARTMENT OF AGRICULTURE

Grants may be issued to foster the growth of the bioscience industry in the state. Applicants should focus on one or more of the following areas:

- Supporting biotechnology innovation and commercialization
- Promoting the creation of bioscience jobs in the state to be filled by graduates from institutions under the control of the state board of higher education;
- Encouraging the development of new bioscience technologies and bioscience startup companies in the state;
- Leveraging the agriculture industry in the state to support the development of bioscience technologies impacting livestock operations and crop production;
- Promoting bioscience research and development at institutions under the control of the state board of higher education;
- Encouraging coordination and collaboration among other entities and programs in the state to promote bioscience innovation goals.

A. Applicant Information (please print or type)

Applicant Company			Telephone Number	
Applicant Name		Title		
Mailing Address		City	State	ZIP Code
Physical Address	City	State	ZIP Code	County
Email Address				

B. General Description of the Project

1. Grant Application Amount (BIG)	
2. Estimated Total Cost of Project (BIG+MATCH)	
3. Estimated Time of Completion of this Project	
a. Date of Final Report	

4. Brief description of your project: (please limit response to space provided)

C. Project Purpose

1. What is the specific issue, problem, or need the project will address? (Please limit response to space provided.)

2. Why is the project important and timely?

3. What are the objectives of the project?

4. If the project is a continuation of a project funded previously, describe how the project differs from and builds on the previous project's efforts.

5. Describe the stakeholders other than the applicant, individuals, and organizations involved in the project. Who is in support of this project and why?

D. Expected Measurable Outcomes

1. Provide a goal - A goal is what you hope to achieve as a result of conducting the activities and producing the outputs (tangible results that can be seen, touched, handled, or moved about) of the project. Examples of outcome-oriented goals could include a change in knowledge, change in behavior, and change in conditions that make a difference for the beneficiaries of the project.

2. Provide your Performance Monitoring Plan. This is a description of how you will monitor your progress toward achieving your goal.

3. What are your data sources for monitoring performance? For example, will you conduct surveys or use questionnaires?

4. Describe how you will share the results of the project?

E. Work Plan

Project Activity – Describe the project activities that are necessary to accomplish the objectives.	Who will do the work?	When will the activity be accomplished? (Month and Year)

F. Project Budget

Expenditure	BIG Request	Internal	State Funds	Federal Funds	Other Matching (In-Kind & 3rd Party)	Total
Salaries/Fringe Benefits						
Travel						
Equipment						
Supplies						
Marketing and Advertising						
Contractual						
Other						
Total Requested						

Project Budget Detail

Salaries/Fringe Benefits
Equipment
Supplies
Travel
Marketing and Advertising
Consultant Fees
Other Direct Costs
Indirect Costs

Press Release Information Sheet

The information on this sheet may be used for public releases in announcements, press releases and other public information.

Applicant Information

Contact Person		Telephone Number	
Address	City	State	ZIP Code

Project Information

Title of Project	
Project Start-up Date	Project Completion Date
Brief summary of the project, product or process and proposed commercialization efforts: (please limit to space provided)	
Total Funds Requested from BIG	
Total Project Budget	
What will the grant funds be used for? (Please limit response to space provided)	
Name	Title
Signature	Date

G. References

1. Please list the name and phone numbers of two references who are familiar with the applicant's work relevant to the application.			
Name		Telephone Number	
Address	City	State	ZIP Code
Name		Telephone Number	
Address	City	State	ZIP Code

H. Conclusion

<p>A complete application must contain all information requested and have original signatures of the applicant. The completed application must be submitted on or before the deadline date at:</p> <p>North Dakota Department of Agriculture Bioscience Innovation Grant 600 E Boulevard Ave., Dept. 602 Bismarck, ND 58505-0020</p> <p><i>*Electronic submissions are acceptable but must be signed</i></p> <p>By affixing your signature(s) to this application, the applicant(s) certifies to have read and understood all conditions set forth therein and that all information contained in this application package is true to the best of the applicant's knowledge, information and belief.</p> <p>The North Dakota Department of Agriculture reserves the right to modify or terminate any subsequent agreements with applicant if, at a future date, the North Dakota Department of Agriculture becomes aware of material misrepresentation(s) contained in this application.</p>
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Applicant Signature	Date
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Applicant Signature	Date
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