

The Franklin Chamber Foundation builds economic vitality with partnerships, programs, education and community involvement whose purpose compliments the work of the Franklin Chamber of Commerce.

## **Small Business Capacity-Building Grant Application**

Incomplete applications will be considered ineligible

(please type or print)

Date of Grant Application (mm/dd/yyyy):							
ORGANIZATION INFORMATION							
Organization Name:							
Organization Address:							
City:	State:		Zip:				
Contact Person:							
Job Title:		Email:					
Phone Number:		Fax Number:					
How long has your business been in operation?							
Number of <b>FULL-TIME</b> employees at th	e organization?						

PROJECT INFORMATION								
Project Name:								
Anticipated Start Date (mm/dd/yy	Anticipated Start Date (mm/dd/yyyy):  Anticipated End Date: (mm/dd/yyyy):							
Project is (please select only one):								
□ Ne	ew e		]	☐ Existing				
Be su	ure to include informat	tion regarding o	t (Limited to 500 words verall impact to your business, and innovation (if applicable)	)				

FINANCIAL INFORMATION	
Amount requested from the Franklin Chamber Foundation (up to \$2,500):	\$
Estimated <b>total</b> cost of the project:	\$
Outline the complete budget for this particular project showing income and expenses:	
Other Funding Sources: Please list other funding sources.	
Sustainability: What are the plans for future funding of this project (if applicable)? Su	mmarize a specific plan for
project sustainability (Limited to 500 words).	minarize a specific plan for

Please be sure your application is competed in its entirety. You may drop off or mail your application to:

Franklin Chamber of Commerce 120 E Jefferson Street Franklin, Indiana 46131

Or you may scan and email your application to franklincoc@franklincoc.org

For eligibility, applications and all supporting documents must be received by July 31, 2023.

Please read the following and sign:

- ✓ I understand my application will be reviewed and scored by the Franklin Chamber Foundation Board of Directors, and representatives from the Franklin Chamber of Commerce, Discover Downtown Franklin and a member of the Franklin Economic Development Commission.
- ✓ I have attached letter(s) of support from community members regarding the project, community need, community involvement and sustainability.
- ✓ I have attached other relevant information that may enhance my application.
- ✓ I understand the project must be completed 12 months after receipt of funds.
- ✓ I understand I will be **required** to submit an impact statement within 12 months of receipt of funds to the Franklin Chamber Foundation that will be shared with the Franklin Economic Development Commission.

Signature	 Date

## **Evaluation Criteria for Capacity-Building Grants**

Criteria	Points Available	Score
<b>Business Longevity</b>		
0-1 year	0	
1-3 years	2	
3-5 years	3	
5-10 years	4	
10+ years	5	
Overall Impact to the Business	10	
Sustainability Plan	10	
Community Involvement	2-10	
Letter(s) of Support	2-5	
Community Need	2-5	
Innovative Idea	2-5	
TOTAL POINTS AVAILABLE	50	