

Applicant Name: \_\_\_\_\_



## Oklahoma Department of Agriculture, Food, & Forestry Request for Proposals Specialty Crop Grant Program Application

1. Proposals must be typed, single spaced.
2. Each page should be numbered, with applicant's name at the top of each page.
3. Application packets should not exceed 8 pages including supplemental documentation.
4. An electronic version of the application packet (in MS Word format) must be submitted to the email address listed in the contact information.
5. Submit ONE complete original application packet signed by the person authorized to receive funds and mail to Oklahoma Department of Agriculture, Food, & Forestry at the address below.
6. Do not bind the application packet. The application packet should be stapled or paper clipped in the upper left-hand corner.

### Submission of Application

1. An electronic grant application must be emailed to [johnny.roberts@oda.state.ok.us](mailto:johnny.roberts@oda.state.ok.us) before **5 pm Friday April 15, 2011**. **Applications must be received by the grant deadline.** Applications that do not adhere to this deadline will not be accepted.
2. A signed printed copy of the application must be at the Oklahoma Department of Agriculture, Food, & Forestry at the address below before **5 pm Friday April 15, 2011**.

### Contact Information

Johnny Roberts  
Project Coordinator  
Oklahoma Dept. of Ag, Food, & Forestry  
Office: (405) 522-3752  
Fax: (405) 522-4855  
Email: [johnny.roberts@oda.state.ok.us](mailto:johnny.roberts@oda.state.ok.us)

Jamey Allen  
Director, Market Development Services  
Oklahoma Dept. of Ag., Food, & Forestry  
Office: (405) 522-4676  
Fax: (405) 522-4855  
Email: [jamey.allen@oda.state.ok.us](mailto:jamey.allen@oda.state.ok.us)

A signed hard copy must be mailed to:

**Oklahoma Department of Agriculture, Food, & Forestry  
Attn: Johnny Roberts  
2800 N. Lincoln Blvd.  
Oklahoma City, OK 73105**

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**GENERAL INSTRUCTIONS**

- ◆ Application form must be completed in its entirety and required documentation attached.
- ◆ Incomplete applications will not be reviewed.

**APPLICANT INFORMATION**

1. NAME OF APPLICANT \_\_\_\_\_
2. FEDERAL TAX ID NUMBER OR SOCIAL SECURITY NUMBER \_\_\_\_\_
3. MAILING ADDRESS \_\_\_\_\_
4. CITY/ZIP \_\_\_\_\_
5. AGRIBUSINESS ENTITY (Business, University, Government, etc) \_\_\_\_\_
6. PHONE \_\_\_\_\_ FAX # \_\_\_\_\_
7. E-MAIL ADDRESS \_\_\_\_\_ WEB ADDRESS \_\_\_\_\_

**PROJECT INFORMATION**

1. PROJECT NAME \_\_\_\_\_
2. LOCATION OF PROPOSED PROJECT \_\_\_\_\_
3. START AND COMPLETION DATES \_\_\_\_\_

**ABSTRACT** (200 words or less)

Applicant Name: \_\_\_\_\_

**Project Purpose and Goals** - Clearly state the purpose of the project and explain why the project is important.

**Potential Impact** - Discuss the number of people or operations affected and the intended beneficiaries of the project. The potential economic impact if such data is available and relevant to the project. (One page or less)

**Expected Measurable Outcomes** - For each project, describe at least one distinct, quantifiable, and measurable outcome that directly and meaningfully support the project's purpose.

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**Work Plan** - For each project, explain briefly the activities that will be performed to accomplish the objectives of the project and indicate who will do the work of each activity. Include appropriate time lines. Outcomes may exceed the grant period; simply indicate that they exceed the grant period and what work will be ongoing.

**Financial Feasibility** - How do you intend to use the grant funds? Provide a breakdown of the components of the proposal and where the grant funds fit into the overall project financing. Prioritize funding needs, if possible. Provide budget estimates for the total project cost. **Remember, no administrative funds may be included in the budget request.**

**Budget**

Required table format.

Budget for Project X					
Category	SCBGP-FB Funds	Cash Match	In-Kind Match	Total	Comments
<b>Year 1 budget</b>					
<b>Year 2 budget</b>					
<b>Total for 2 years</b>					

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**Budget Narrative** - Provide sufficient information in paragraph format about the budget categories listed for each project to demonstrate that grant funds are being expended on eligible grant activities that meet the purpose of the program.

**Project Oversight** - Describe the oversight practices that provide sufficient knowledge of grant activities to ensure proper and efficient administration.

**Project Commitment** - Describe how all grant partners commit to and work toward the goals and outcome measures of the proposed project.

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*I certify that the information provided is true and correct to the best of my knowledge. If approved for the specialty crop grant, I agree that the organization will assume sole responsibility of any and all debts or liabilities that may be incurred from this project; and will provide the required documentation to the Oklahoma Department of Agriculture, Food, & Forestry upon request. I understand that if this proposal is funded, I will be required to sign a grant agreement and other necessary documentation containing terms and conditions upon which funds will be released.*

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Signature

Title

Date