

## Mid-Day Women's Alliance and CAP Services Inc. 5th Annual Fox Cities' Women Entrepreneurship Grant Program Application

**Application Deadline:** Completed and signed applications must be delivered to MDWA by midnight Thursday, June 30, 2022. Email to: [middaywomenbizgrant@gmail.com](mailto:middaywomenbizgrant@gmail.com)

To learn more about our organizations: [capservices.org](http://capservices.org) / [middaywomen.org](http://middaywomen.org)

### **Personal Information**

Applicant Name \_\_\_\_\_ Title \_\_\_\_\_  
First Name Last Name (i.e. Owner, President)

Home Address \_\_\_\_\_  
Street Address City State Zip County

Email \_\_\_\_\_

Phone \_\_\_\_\_ Permission to Text? Yes/No

Business Organization Type?  Incorporated  Limited Liability Company (LLC)  
 Partnership  Sole Proprietorship  Not for Profit

Ownership Information (applicants must be at least 51% woman-owned):

Name (First, Middle Initial, Last)		Phone #	Ownership %
1.			0
2.			
3.			
4.			
5.			
All Others:			0

### **Business Information**

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ **Select County**  
Street Address City State Zip County

Email \_\_\_\_\_ Website \_\_\_\_\_ Phone \_\_\_\_\_

Number of Yrs. this Business in Operation \_\_\_\_\_ Yrs. of Experience in this type of Business \_\_\_\_\_  
 What is your total revenue to date (approximately)? \_\_\_\_\_ (must be greater than \$0)

## **VIDEO APPLICATION INSTRUCTIONS**

Please create your video application to answer each of the following 8 questions in order. Spend about 2 minutes on each question but limit the total time to no more than 16 minutes.

### **Application Questions:**

1. Describe your business and the product or service you offer, as well as why you started it.
2. Describe your target market (customers, geographic area, and industry).
3. Explain who your competition is.
4. What sets your business apart from others in your market? What makes it different?
5. What is your background/experience in operating this type of business?
6. Describe why you need this grant and how you will use it to help improve your business. Please estimate how you think your revenue will grow as a result of receiving this grant (\$ or %).
7. Have you received other grants or had access to other resources to support your business? Please describe, including how you utilized those funds?
8. If you are selected as our grant recipient, what benefits are you hoping to gain from Mid-Day Women's Alliance and CAP Services, Inc.? Please be as specific as possible.

### **Video Application Submission:**

To submit your application, be sure to complete pages 1 and 3 of this form.

E-mail the form plus your video to: [middaywomenbizgrant@gmail.com](mailto:middaywomenbizgrant@gmail.com)

Alternatively, if you have problems e-mailing your video file, please contact us for a Dropbox location access.

Signature: (required)

- The business applicant assures that the representations made in this application, including all exhibits and attachments, are true and correct to the best of the applicant's knowledge. Information submitted will be kept confidential with CAP Services Inc, Mid-Day Women's Alliance and judges of the contest.
- The applicant understands that the purpose and timing of funds granted through this program will be decided by consensus of the business coaching team and the awardee.
- The grantee will be required to enroll in business assistance services with CAP Services Inc. or other partner agency immediately upon notification of being selected and agrees to adhere to recommendations and activities to develop or complete their business plan.
- The grantee agrees to be a monthly active participant in business mentoring with CAP Services Inc. and Mid-Day Women's Alliance for 12 months including a follow-up visit to the business within 12 months of receiving the award.
- The grantee agrees to be an active participant in Mid-Day Women's Alliance mentoring, training, and networking events for 1 year. Membership costs plus all costs of attendance are covered as part of this grant (value: \$300+).
- A Members' Choice Award Recipient will be selected from among the finalists at the Mid-Day Women's Alliance meeting on Wednesday, August 17, 11:30 am - 1:00 pm. The Members' Choice award recipient will be granted a free 1-year membership to Mid-Day Women's Alliance (value \$120) and agrees to be an active participant in Mid-Day Women's Alliance.
- Applications will be reviewed by a panel of judges who will choose candidates for the final round. If chosen, finalists must be available on Thursday, August 4, 2022, from 1:00 pm until 5:00 pm for the final in person interview.
- Applicants must also be available on Wednesday, August 17, 2022, from 11:30 am until 1:00 pm for the May Mid-Day Women's Alliance Members' Meeting, Members' Choice Award, and Networking.

I agree to the above requirements by applying for this grant and providing my signature:

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Signature

Date