

**Marketing and Development Division** 651-201-6646

**Minnesota Specialty Crop Block Grant Program 2017 Application**

**Deadline: 4 pm April 27, 2017. Email to David.Weinand@state.mn.us**

Name of Applicant Organization \_\_\_\_\_

Name and Title of Person to Sign the Contract \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Project Coordinator/Principal Investigator (PI) Name \_\_\_\_\_

PI Title \_\_\_\_\_

PI Phone \_\_\_\_\_ PI Email \_\_\_\_\_

Industry Sector or Specific Crop Targeted (*example: tree fruit: apples*) \_\_\_\_\_

County, Counties, or Area of Project Impacted (*example: statewide, midwest*) \_\_\_\_\_

Project Title \_\_\_\_\_

Project Timeline (start and end dates) \_\_\_\_\_

**Include all components of this application,  
also listed to the right.**



See grant manual for description of each heading.  
(7 page limit, not including cover sheet and letters of support).

- Cover page
  - 1. Project Description
  - 2. Project Abstract
  - 3. Project Purpose
  - 4. Potential Impact
  - 5. Expected Measurable Outcomes
  - 6. Work Plan Narrative
  - 7. Work Plan Timeline 8. Budget Table
  - 9. Budget Narrative
  - 10. Project Oversight/Team Strength/Commitment
- Attach Letters of Support

Grant Request Amount (10,000–100,000) \$ \_\_\_\_\_ DUNS# \_\_\_\_\_

*Certification: I certify to the best of my knowledge that the information in this application is true and correct and that I am legally authorized to sign and submit this application on behalf of this organization, which is legally eligible to enter into a grant contract with the State of Minnesota.*

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_  
*of the sponsoring organization*

**Project Title** \_\_\_\_\_

**1. Project Description** *(1 sentence)*

**2. Project Abstract** *(200 or fewer words)*

**3. Project Purpose**

**4. Potential Impact**

**5. Expected Measurable Outcomes**

Select the appropriate outcome(s) and indicator(s)/sub-indicator(s)

You MUST choose at least one of the eight outcomes listed in the SCGP Performance Measures

([www.ams.usda.gov/sites/default/files/media/SCBGP%20FY15%20PerformanceFINAL\\_10272015.pdf](http://www.ams.usda.gov/sites/default/files/media/SCBGP%20FY15%20PerformanceFINAL_10272015.pdf)), which were approved by the Office of Management and Budget (OMB) to evaluate the performance of the SCBGP on a national level.

### Outcome Measures

Select the **outcome measure(s)** that are applicable for this project from the listing below.

- 1:** Enhance the competitiveness of specialty crops through increased sales (required for marketing projects)
- 2:** Enhance the competitiveness of specialty crops through increased consumption
- 3:** Enhance the competitiveness of specialty crops through increased access
- 4:** Enhance the competitiveness of specialty crops through greater capacity of sustainable practices of specialty crop production resulting in increased yield, reduced inputs, increased efficiency, increased economic return, and/or conservation of resources
- 5:** Enhance the competitiveness of specialty crops through more sustainable, diverse, and resilient specialty crop systems
- 6:** Enhance the competitiveness of specialty crops through increasing the number of viable technologies to improve food safety
- 7:** Enhance the competitiveness of specialty crops through increased understanding of the ecology of threats to food safety from microbial and chemical sources
- 8:** Enhance the competitiveness of specialty crops through enhancing or improving the economy as result of specialty crop development

### Project Beneficiaries

List the beneficiaries and describe how they benefit from this project.

## 6. Continuation Project Information (if applicable)

- Describe how this project will differ from and build on the previous efforts.
- Provide a summary (3 to 5 sentences) of the outcomes of the previous efforts.
- Provide lessons learned on potential project improvements:
  - What was previously learned from implementing this project, including potential improvements?
  - How are lessons learned and improvements being incorporated into the project to make the ongoing project more effective and successful at meeting goals and outcomes?

## **7. Describe the likelihood of the project becoming self-sustaining and not indefinitely dependent on grant funds.**

### **Other support from Federal or State Grant Programs**

Was this project submitted to another Federal or State Grant program for funding or is another Federal or State grant program currently funding it?      Yes      or      No

*If yes, identify the program and describe how the current Specialty Crop project differs from or supplements the other grant program(s) efforts.*

## **8. Work Plan Narrative**

## 9. Work Plan Timeline

Project Activity	Who	Timeline

## 10. Budget Table

Category	Grant Funds Requested	Matching Funds (optional)	Total Cost
Personnel			
Fringe Benefits			
Equipment			
Supplies			
Contractual			
Other			
Project Income			
<b>Total Project Costs</b>			

## **11. Budget Narrative**

**Personnel**

**Fringe Benefits**

**Equipment**

**Supplies**

**Contractual**

**Other**

**Project Income**

## 12. Project Oversight/Team Strength/Commitment

### STATEMENT OF SOLELY ENHANCING SPECIALTY CROPS

By checking the box to the right, I confirm that this project solely enhances the competitiveness of specialty crops in accordance with and defined by 7 U.S.C. 1621. Further information regarding the definition of a specialty crop can be found at [www.ams.usda.gov/services/grants/scbgp](http://www.ams.usda.gov/services/grants/scbgp).

### Attach letters of Support

List contact information for any support letters below (include organization, name of person who signed, e-mail/phone). Attach any signed letters of support (letters may be forwarded as .pdf attachments along with your application).