

Organization Name (Please print or type)		
Contact Name	Mailing Address	
City	State	Zip Code
Phone	Fax	Email
Website		

Intent to Partner

With the submission of this application and all accompanying materials, _____ (name of local development organization) hereby acknowledges its willingness to partner with the North Dakota Department of Commerce through the use of grants from the Partners and Marketing program. *(Note: If this is a joint submission from two or more economic development organizations, each organization must sign and submit an "Intent to Partner."*

Economic Development Professional Signature	Date
Economic Development Board Representative Signature	Date

Checklist for Application Submission

<input type="checkbox"/> Estimated budget for activity (provide cost breakdown; demonstrate applicant(s) have committed at least 10 percent of total budget to activity)
<input type="checkbox"/> General marketing plan (unless your application is for marketing plan development)
<input type="checkbox"/> Three objectives (<u>must</u> include at least three measurable areas) For example: a) Collect 50 resumes from out-of-state workforce recruitment activity. b) Increase by 20% the number of unique site visitors to new web site. c) Generate 5 requests for more information about business opportunities in the region.
<input type="checkbox"/> Samples of current marketing materials (unless application is prior to material development)
<input type="checkbox"/> List of applicant's targeted industries, job classifications and/or geographic areas

**Results and evaluation of the activity will be needed to release approved funds.*

Name of Activity:
Activity Targets: <input type="checkbox"/> Business Recruitment <input type="checkbox"/> Workforce Recruitment <input type="checkbox"/> Essential or Critical Services <input type="checkbox"/> Marketing Plan Development <input type="checkbox"/> Strategic Plan Development
Type of Activity: (check one) <input type="checkbox"/> Collateral Materials <input type="checkbox"/> Trade Mission <input type="checkbox"/> Advertising <input type="checkbox"/> Specialty Event <input type="checkbox"/> Other, explain: _____

Business or Workforce Recruitment

Grant Amount Requested	Activity Date
Activity Location	
Expected number of prospects this activity will allow you to reach:	
Brief description of activity:	
Budget for activity: (provide cost breakdown)	
Three measurable objectives for activity: 1) 2) 3)	
Targeted industry(ies) or job classifications for activity:	
Targeted geographic area(s) for activity (must be outside ND):	

Submit all materials to: Tracy Finneman / North Dakota Department of Commerce / PO Box 2057 / Bismarck ND 58502-2057 / Phone: 701-328-5352 / Fax: 701-328-5320 / E-mail: tfinneman@nd.gov

Strategic Plans or Marketing Plans

Grant Amount Requested	Activity Start Date
Impacted Activity Location or Region	
Brief description of activity:	
Budget for activity: (provide cost breakdown)	
Three measures of success for activity: 1) 2) 3)	

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