These instructions are for the completion of the ROOT Grant Program Application.





Relocation Opportunity for Outstanding Talent (ROOT) Grant Application

This is your *first* step in your ROOT Grant application. Once you select submit, your application will be sent to our review team and an invitation to the portal will be sent to you to *complete* your application.

plicant (Employer) Name *	
imary Contact First Name *	
imary Contact Last Name *	
imary Contact Email Address *	
ysical Address *	

City *	
State *	
Select	~
Zip Code *	
Telephone *	
Provide a telephone number	
FEIN *	
Total number of employees at this business *	
Total number of relocation grant positions being requested *	
Select	~
Is this employer enrolled in the Find the Good Life Candidate Marketplace? * \circledast No \odot Yes	
Industry (choose one) *	
Select	~
Occupation from In-Demand Occupations (see guidance) *	
Does the position require specific licensure or certifications? *	
This relates to board issued license requirements	
Is this occupation essential to operations? * ® No O Yes	
If so, please explain *	
How long has this position(s) been vacant? *	

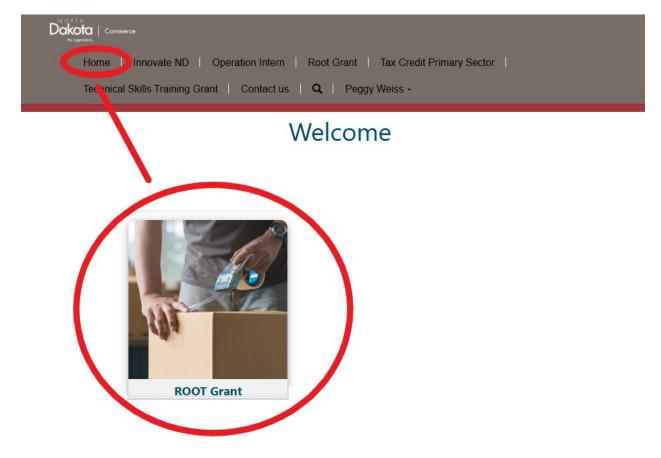
Vhat costs have been used in the recruitment of this position? (Job fairs, recruitment services, iob posting ads, etc.)	
List example: \$500 job posting boosting, \$325 booth registration for job	fair, etc.
lave any offers been made to candidates that were not accepted? *	
Number of offers made per position	
lave any candidates that did not accept job offers share the reason? *	
Provide any insight from past candidates	
Vas the cost to relocate ever indicated as a barrier? *	
Provide any insight from past candidates	
lave hiring bonuses or relocation incentives been offered in the past for this occupation? *	
Provide any insight from past candidates	
f so, what was the maximum dollar amount? *	
Provide any insight from past candidates	
Pate the position will be posted *	
M/D/YYYY	î
esired start date for this position(s) *	
M/D/YYYY	1

Once submitted, an email invitation is sent to the applicant when we associate the application with an existing contact and account in D365.

They click the invitation link and either use the existing login associated with their email provided in the application, or the create a new account. These instructions are all in the emailed invitation.

Once logged in:

Click Home and select the ROOT Grant tile:



Select down arrow and select Edit:





Relocation Opportunity for Outstanding Talent (ROOT) Grant

Please select the application you wish to complete or edit by clicking on the down arrow next to the application and select Edit.

∀ My •		Create
Applicant Name 🕈	Created On	
Test Company	3/3/2025 2:46 PM	·
		🕑 Edi





Workforce Development

Relocation Opportunity for Outstanding Talent (ROOT) Grant Application

If you cannot finish the form, for any reason, please click "Save and Continue" then you can close the page.

NOTE: When you return, the form will bring you back to your previous location on the form.

When you are finished with your application, please click the "Certify" button on the Certification page and click the "Submit" button.

BUDGET

Budget Narrative - Please explain the total amount of the hiring incentive for each position being requested plus the match. Identify the source of match. If drafted, please provide the language used in job postings. Grant funding is for relocation associated costs only.

For each position being requested include the dollar amount being requested plus the match amount. Ex: Nurse 1- \$7,500 total (3,750 Grant and equal match), CNA 1,2,3,4, and 5- \$5,000 each (\$2,500 Grant and equal match)

® No ○ Yes	would be internal fro	om the business or fro	m a partner (EDC, Chan
Has all match been secured No O Yes	-	l or a letter from the pa	artner is able to be prov
Describe how Match relates to		ming from the busines	s or from a partner like a
		0	e provided directly to the
			relocation Ex: 3 months
(),	•		noving truck expenses,
		•	- · ·
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Add Budget Line Items by clicking Create:

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e h	Position Name *		
ur lo: da 1 m.e-	Amount Requested		
	Match Amount		
ur	Total Funds Requested (Amount requested + Match) Will calculate upon submitting		l b itic
da 1 m			ite e the
	Submit		
			Cr
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When finished with budget line items, click Save and Continue

Add Supporting Documentation: Job Descriptions for all positions being requested and letters from any partners that may be contributing match funds by clicking Add Files:





COMMERCE

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SUPPORTING DOCUMENTATION	
Supporting Documentation	
	Add files New folder
There are no folders or files to display.	
Please click the Next button to navigate to the next page to finalize and c	ertify your application.
Previous Save and Continue	

Select Save and Continue:



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CERTIFICATION
I, certify that to the best of my knowledge that the information in this application is true and correct. I shall maintain accurate accounting records. I further certify that the applying entity listed is in good financial standing and has no delinquencies on existing North Dakota State Government grants or loans. Furthermore, I have read and understand the Relocation Opportunity for Outstanding Talent Grant guidelines. I will abide by the guidelines of the Relocation Opportunity for Outstanding Talent Grant Program.
Final Submission? ® No O Yes
Signature
If the application is deemed incomplete, due to missing information or insufficient completeness of the overall application, the application will be denied and resubmission will be requested.
Previous Submit

Select Final Submission if you are finished.

E-sign (type name) and Submit.