

Mississippi Development Authority
Economic Development Marketing Grant Program

APPLICATION FORM
FISCAL YEAR 2006

Organization Name: _____

Mailing Address: _____

Contact Person: _____ Title: _____

Telephone: _____ Fax: _____

E-mail: _____ www: _____

Project Title: _____

Describe Project: _____

County/Counties participating in project: _____

Total Project Budget: \$ _____ (Include only eligible expenses/attach detailed budget description)

Amount Requested: \$ _____ (Up to 50% of eligible project costs - not to exceed \$10,000 or \$15,000 if regional project)

Source of Local Funds: _____

Please describe the end product. (Attach detailed explanation) _____

Do you expect to influence those outside Mississippi? _____ Yes _____ No

Approximately how many people will your activity reach? _____

Will this project create or sustain jobs in your area? _____ Yes _____ No

Explain _____

How will this project affect the local and/or state tax base? _____

What benefits will this project bring to your community? _____

APPLICATION CHECKLIST

Place your initials in each blank to acknowledge that you have read, understood, and agree to comply with each regulation.

- _____ The application packet must include the original application with attachments, five copies of the application with attachments.
- _____ Copy, layouts, storyboard or facsimiles to show design and content are attached. If a project is a reprint or if design will be of minimum charge, attach previous and/or similar projects with description of changes.
- _____ A mailing address, telephone number, E-mail address, or web site address is listed for inquirers to request additional information.
- _____ The project is professionally produced.
- _____ The application identifies target audiences, demonstrates potential for economic return and provides research tracking/measurement.
- _____ The application identifies means of distribution where applicable.
- _____ The application is signed by both the Project Director and the MDA Regional Office Manager.
- _____ The logo and grant phrase, "***Partially funded by the Mississippi Development Authority,***" is displayed.
- _____ Attach a copy of Marketing/Business Recruitment strategy of the applying agency.
- _____ Attach a copy of letters of corroboration from all involved entities.
- _____ Attach a detailed budget and description of end product.

Submission deadline: February 1, 2006

_____	_____	_____	_____
Project Director/Title	Date	MDA Regional Manager	Date

For more information on the Economic Development Marketing Grant Program, contact the local MDA Regional Office or visit the MDA website at www.mississippi.org.

**Mail Application to:
Mississippi Development Authority
Regional Services Division
PO Box 849
Jackson MS 39205**