

Atlantic Agriculture Research and Innovation Initiative

Application Form

Project/Client #: (Office Use Only)

Section 1 - Applicant Information

Applicant:

Contact name and title:

Mailing Address:

Civic Address (if different than mailing address):

Village/Town/City

Province

Postal Code

Telephone No. Cellular Phone No.

Fax No.

E-mail Address

Type of Business. Choose one and complete the required information:

- Non-government agricultural organization, club, cooperative, foundation, group or association

Revenue Canada Business Number: _____

- Atlantic Canadian institution, academic institution or agri-business

Revenue Canada Business Number: _____

Section 2 - Project Detail

Project Title:

Funding Sources									
Cash Contributions	Year 1			Year 2			Year 3		
	Amount \$	Applied	Confirmed	Amount \$	Applied	Confirmed	Amount \$	Applied	Confirmed

You are applying as (check one):

organization
 club
 cooperative
 foundation
 group
 institution
 agri-business
 Other: _____

Check the principal commodity impacted:

Beef
 Eggs
 Broilers
 Other Poultry
 Fruit
 Mixed
 Dairy
 Goats
 Vegetables
 Potatoes
 Grains and Oilseeds
 Swine
 Sheep
 Horses
 Greenhouse and Nursery
 Other: _____
 Other Crops: _____
 Other Livestock: _____

Project Proposal

Brief Summary/Overview

Provide a brief summary/overview of the project:

Objective

Background

Provide background on the organization business and the issue to be addressed with the proposed research:

Description of the Project (technical details)

Provide a detailed overview of the activities undertaken for this project:

Methodology

Impacts

Deliverables

Results and Project Implications

- A. Outline the projected results of the project.

- B. Briefly outline any impact or influence this project is projected to have on your business plans/ work activities?

- C. What economic impact will your project have on the region/the sector?

- D. Can you identify any environmental or food safety risks as a result of this project?

Communication

Describe how the results will be communicated?

Milestones

Activities	Start Date	End Date	Output

Budget

Utilize the following project template:

Project Expenses			
Budget Items	Year 1	Year 2	Year 3
	Project Costs	Project Costs	Project Costs
Salaries and Stipends			
Technical			
Summer Student			
Graduate Student			
Post Doctorate			
Contracted Labour			
Professional Consultant			
Lab Supplies and Services (consumables)			
Equipment or Facilities			
Rent			
Other (specify):			
Travel			
Field work			
Other (specify):			
Communication Costs			
Publication costs			
Other (specify):			
Total Project Costs			
Support from industry			
Support from other sources			
Requested from Pan-Atlantic Research and Innovation Initiative			

Section 3 - Declarations and Consent to Use Personal Information

By submitting this form for benefits under the program, I/We:

- certify that all the information provided is complete and correct
- understand that personal information on this form is collected under the respective Provincial *Freedom of Information and Protection of Privacy Acts* as it relates directly to and is necessary for the Program. It will be used for determining eligibility for program assistance and will be shared with the Canada Revenue Agency regarding the taxable benefit and Agriculture and Agri-Food Canada and the Provincial governments, regarding program management, claims, audits, and evaluations of this program
- agree that information provided for purposes of the Program may be shared with the Canada Revenue Agency as it pertains to any potential taxable benefits, as well as with Agriculture and Agri-Food Canada and the Provincial governments or its agent regarding claims, audits, and evaluations of the program
- understand that failing to comply with all application requirements may delay the processing of the application, or may render me ineligible for receiving assistance under the program
- understand and agree that the social insurance number (SIN) and the business number are collected under the authority of the *Income Tax Act* for the purposes of reporting income
- acknowledge that my/our completing this application form and by receiving advice from Provincial Government or other Program delivery agent does not oblige the Provincial Government or delivery agents to provide funding
- understand that expenses incurred prior to the submission of an approved application are not eligible for assistance under this program
- agree to repay any overpayment amount received if adjustment or audit shows the amount received exceeds the government contribution to which I am entitled under the terms of the Program Payment
- Consent that I have the authority to bind the applicant.

I certify that the information given on this application is to the best of my knowledge complete, true and accurate.

Name of Applicant/ Signing Officer
(Please print)

Signature of Applicant/Signing Officer

Date

Section 4 - Submitting the Application

Please submit completed application form or direct inquiries to:

<p>NB Kevin McCully Director NB Department of Agriculture, Aquaculture and Fisheries</p> <p>Email: kevin.mccully@gnb.ca Tel: (506) 453 2108</p>	<p>NS K. Laurie Sandeson Coordinator Innovation and Acceleration NS Department of Agriculture</p> <p>Email: laurie.sandeson@novascotia.ca Tel: (902) 896 7270</p>	<p>PEI Lynda MacSwain Manager Agriculture Innovation and PEI Department of Agriculture and Forestry</p> <p>Email: lemacswain@gov.pe.ca Tel: (902) 314-0824</p>	<p>NL Sabrina Ellsworth Department of Natural Resources Forestry & AgriFoods Agency</p> <p>Email: sabrinaellsworth@gov.nl.ca Tel: (709) 687-2089</p>
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Date Application Received (Office Use Only):

Date Application Completed (Office Use Only)

Accepted by:

Date Application was Approved (Office Use Only)

Provincial Support: NL \$ _____ NS \$ _____ PEI \$ _____ NB \$ _____