

State of Alaska, Division of Agriculture

SCBGP Applicant Letter of Intent

Applicant Information

Organization Name: _____

Project Contact Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Which best describes you, the lead applicant? (Choose only one)

Nonprofit

University Researcher

University Extension Services

Producer

Producer association or cooperative

State agency or department

Other _____

Are you in compliance with State regulations and in good standing with the State of Alaska? Yes No

Project Information

Identify the specialty crop industry need that your project is addressing and which state funding priorities your project will address.

- Outcome 1: Increasing Consumption and Consumer Purchasing of Specialty Crops
- Outcome 2: Increasing Access to Specialty Crops and Expanding Specialty Crop Production and Distribution
- Outcome 3: Increase Food Safety Knowledge and Processes
- Outcome 4: Improve Pest and Disease Control Processes
- Outcome 5: Develop New Seed Varieties and Specialty Crops
- Outcome 6: Expand Specialty Crop Research and Development
- Outcome 7: Improve Environmental Sustainability of Specialty Crops

Provide a concise project partner and summary (250 words or less) that includes:

1. A brief description of your project.
2. The name of the applicant organization that if awarded a grant will establish an agreement or contractual relationship with the State Department of Agriculture to lead and execute the project.
3. The project's purpose, deliverables, and expected outcomes, and;
4. A description of the general tasks/ activities to be completed during the project period to fulfill this goal.

Project title and duration: _____

(Duration Maximum: 3 years)

Has this project been funded previously? Yes No

If so, why is additional funding needed? _____

Project Purpose

Provide a brief description of your project including the specific issue, problem, or need your project will address. Include the objectives this project hopes to achieve. (maximum 500 words)

Estimated Project Budget

Provide the estimated budget for this project, including funding from other sources, using the template below.

Estimated Budget Summary	
Expense Category	Funds Requested
Personnel	
Fringe Benefits	
Travel	
Equipment	
Supplies	
Contractual	
Other	
	Total Budget

Project Support

For all projects, an industry professional as a partner on the project is required. Please include contact information for this person, as well as a letter of recommendation for the project. In addition to the industry professional component explained above, it is expected that projects will also have the support of other industry organizations, groups of farmers, and individual specialty crop producers. Please list all partner organizations that are formally participating with you on this project. If you are the only formally participating organization, please make that clear. Please list individual specialty crop producers as well as all organizations that formally support your project and include a letter of support from at least one entity.