**Meeting & Event Incentive Program** 

**Direct Support:** *Round 2*

Application Questions

**ELIGIBILITY**

If you answered yes to all the questions below, please continue the application. If you answered no to any questions below the event is not eligible and you should not continue.

* Does the event take place on or before June 30, 2024?
* Will the event generate 25 or more paid overnight room nights?
* Is the event a brand NEW event OR an existing/recurring event in danger of cancellation, postponement, or relocation without program support?
* Does the event affect multiple counties?
* Does the event have the potential to generate significant economic impact?

**APPLICANT ENTITY**

Complete the following questions on the applicant entity and the applicant entity's primary contact. The applicant entity is the company, organization, or destination organizing the event.

* Applicant Entity Name:
* Applicant Entity Street Address:
* Applicant Entity City:
* Applicant Entity State (2 characters):
* Applicant Entity Zip Code (5 digits):
* Applicant Entity Website:
* Applicant Entity Primary Contact First Name:
* Applicant Entity Primary Contact Last Name:
* Applicant Entity Primary Contact Title:
* Applicant Entity Primary Contact Phone:
* Applicant Entity Primary Contact Email:
* Applicant Entity Taxpayer ID#:
* Officers of your organization: (Please indicate whether any have a business or family connection with the Colorado government; if so, please describe).
* Write a brief introduction to the applicant entity and its history of promoting and producing events on this scale. Include examples of past events that demonstrate the entity’s qualifications as an event organizer.

**EVENT INFORMATION**

* Event Name:
* Proposed Event Start Date:
* Proposed Event End Date:
* Event Location (City/Cities):

If your event is not new and is applying under the eligibility status of “recurring or existing event in danger of cancellation, postponement or relocation” without financial support you must provide a detailed explanation to support your claim.

Be specific and draw attention to the financial infeasibility to hold the event without support, citing examples such as vendor proposals that showcase financial restrictions, reduced sponsorship fees, and increased food and beverage costs.

* Event Eligibility Status
	+ new event
	+ recurring or existing event in danger of cancellation, postponement, or relocation
* If you answered “recurring or existing” to the previous question, explain in detail why the event is in danger of cancellation, postponement, or relocation. The explanation must be grounded in the financial infeasibility the event is experiencing.
* If answered “recurring or existing” to the previous question: Upload documentation that supports your explanation above such as an official letter from a c-level executive, copies of vendor proposals, i.e.
* Event Website or social media link:
* Event Description: Brief description of the event for which direct support is requested.
* Permit: If an event is on public property, please include a permit (or letter of support from the host community).

**BUDGET**

All applications must include a detailed budget outlining the event production and promotion budget for grant purposes (only include expenses incurred after grant agreement execution - roughly four weeks after application notification). Label budget file in this format: ApplicantEntity\_Budget. Each file upload has a size limit of 5MB. (Tip: Shorten the file name if you have trouble uploading the file.)

* Total Estimated Event Production and Promotion Cost: $
* Estimated Event Production and Promotion Cost for Grant Purposes (expenses incurred after grant agreement execution - roughly four weeks after application notification)
* Event Production & Promotion Budget for Grant Purposes. Upload a detailed budget with budget categories identified. Include budget amount and % of the total for expenses incurred after grant agreement execution--roughly 4 weeks after application notification.
* Requested CTO Funding Support: $
* Will the event receive any other funding assistance?
* If you answered “yes” to the previous question, describe the other sources of funding assistance, including the names of other public partners and, if possible, the names of other top contributors, whether for financial or in-kind.

**ECONOMIC IMPACT**

Describe the economic impact of this event, including traveler spending and the impact on the affected areas' local economy.

NOTE: If the event will not have access to a hotel pickup report, the applicant entity needs to work with the property beforehand to ensure the hotel property can complete a written verification listing the total room pick-up. This documentation is required and if not provided, any direct support funding awarded must be returned.

* Estimated Number of Room Nights Generated:
* Explain the potential economic impact of the event for the counties affected. Include the method used to determine potential economic impact.
* Projected potential overall direct economic impact (includes the direct effects the organization has on the area due to the event. These include direct employees, organizational spending, employee spending, and traveler spending) $
* Projected traveler spending: Complete the **Economic Impact Chart** to calculate economic impact based on projected travel spending by participants and spectators, and upload.
* Describe the plan for measuring the success of this event. This response should include a description of measures to track attendance/participation, including surveys, ticket sales, gate entry, participation fees, etc.

**MULTI-COUNTY AFFECT**

* Event Counties Affected (Select the main county)
* Other Counties Affected (List the other counties with a direct economic impact due to the event)

Provide supporting documentation to demonstrate potential economic impact. (Multi-County Affect Supporting Documentation: increased lodging or spending/sales tax revenue)

* Documentation must include a letter on official letterhead from a public official in each affected county attesting to the delta changes evident in the county when similar events occur.

**SUPPORTING DOCUMENTS**

The Colorado Certificate of Good Standing is required for non-profit entities and must be in PDF format. Required form is available [**here**](https://www.sos.state.co.us/biz/BusinessEntityCriteriaExt.do?quitButtonFlg=Y).

* Upload Current CO Secretary of State Certificate of Good Standing
* Upload Event Affidavit
* Upload additional supporting documents, such as a sponsorship proposal (Optional)
* Please provide any additional information that you would like to share with the CTO. (Optional)

**ATTESTATION**

Please download and review the Small Dollar Grant Terms and Conditions [**document**.](https://docs.google.com/document/d/1qyA4KnP4DBnPtX__jLVXol17bpvmCOJA/edit)

* I certify that the information in this application, including all attachments, is true and correct to the best of my knowledge.
* I have read and agree to the small dollar grant award terms and conditions.