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Office use only

Code#: \_\_\_\_\_

Year: \_\_\_\_\_

## LOCAL ECONOMIC DEVELOPMENT GRANT (LEDG) APPLICATION FORM

**Instructions:**

1. Before completing this application, please read the “Local Economic Development Grant” Information document.
2. When completing the application, you may contact the Community Development Officer/Field Supervisor/ Local Economic Development Coordinator in your Community/Development Area/Parish for support.
3. Please note that the completed application must be submitted with supporting documents to the Social Development Commission. This will avoid Application being rejected.
4. Do keep a copy of your application for reference.

Date Received: \_\_\_\_\_

**Checklist:**

#	Mandatory Criteria	Provision of Documents (✓)
1	Application signed and attached	
2	Local Economic Initiative (LEI) is recognized on the SDC’s National Local Economic Initiatives Listing / database as at 31 March 2017	
3	Local Economic Initiative (LEI) is in existence for more than 12 months	
4	Local Economic Development (LED) Support Plan is attached	
5	Local Economic Initiative (LEI) submits Business Model	
6	Local Economic Initiative (LEI) <b>not</b> owned or co owned and operated by the CDC/DAC/PDC submits completed <b>Statement of Affiliation</b> document	
7	Local Economic Initiative (LEI) participated in at least two (2) SDC Business Fairs and one (1) SDC led capacity building session in the past <b>24</b> months	
8	Suppliers <b>Proforma-Invoices</b> submitted ( <i>3 minimum</i> ). <b>NB: Suppliers’ invoices must possess at least their TRN/GCT</b>	

**AUTHORIZATION BY**

<b>PARISH MANAGER'S NAME</b>	
SIGNATURE	
DATE	

<b>COMMUNITY DEVELOPMENT OFFICER'S NAME</b>	
SIGNATURE	
DATE	

<b>SUPERVISOR'S NAME</b>	
SIGNATURE	
DATE	

<b>LOCAL ECONOMIC DEVELOPMENT COORDINATOR'S NAME</b>	
SIGNATURE	
DATE	



# LOCAL ECONOMIC DEVELOPMENT GRANT (LEDG)




## APPLICATION FORM

**PROJECT TITLE:** \_\_\_\_\_

**NAME OF PARISH:** \_\_\_\_\_

**COMMUNITY LEI LOCATED:** \_\_\_\_\_

**NAME OF LOCAL ECONOMIC INITIATIVE (LEI)** \_\_\_\_\_

Area for grant funding	✓
 Procurement of Equipment	
 Marketing	
 Business Registration	

# PROJECT PROPOSAL

**SECTION 1: DETAILS OF APPLICANT**

- ✚ Name of LEI: \_\_\_\_\_
- ✚ Type of Business: \_\_\_\_\_
- ✚ Name of CDC/DAC/PDC that own/ co-own or affiliated to LEI: \_\_\_\_\_
- ✚ Year LEI was established: \_\_\_\_\_ Number of persons employed \_\_\_\_\_
- ✚ In which year was the LEI's Local Economic Development (LED) Support Plan completed? \_\_\_\_

LEI CONTACT	
Mailing Address	
Telephone Number	
Email & Website address	
TRN/GCT# (if available)	
CONTACT PERSONS DETAILS	
Name of Manager	
Telephone number(s)	
Email Address	
BUSINESS INFORMATION	
Is the LEI registered? <b>Y/N</b>	
Type of Registration	<input type="checkbox"/> Cooperative <input type="checkbox"/> Benevolent Societies <input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Company <input type="checkbox"/> Not applicable

### LEI Management Team

Name (First and Surname)	Position held in the LEI	Time in Position	Contact Number & Email

✚ Project Start date: \_\_\_\_\_

✚ Project End date: \_\_\_\_\_

✚ Application Submission date: \_\_\_\_\_

✚ Name & Signature of one LEI Executive Member:

1. \_\_\_\_\_  
PRINT NAME
SIGNATUTRE
*Date*

✚ Name & Signature of one CDC/DAC/PDC Executive Member:

2. \_\_\_\_\_  
PRINT NAME
SIGNATUTRE
*Date*

## SECTION 2: PROJECT OVERVIEW

Write a summary to include the name of the project, objectives, activities to be undertaken, total budget and who are the persons/organizations that will work together to implement the project. [Why do you need this money? What will the money be used for?]

## SECTION 3: CONTEXT

[**BRIEF PROFILE ON LEI** which includes relevant information on the community in which LEI operates, what led to the establishment of the LEI, the mission of the LEI, what needs / problems are being solved by the LEI, how many persons are currently employed to the LEI. Also state the challenges being faced by the LEI and show how the grant will assist/impact.]

**SECTION 3: CONTEXT cont'd**

**[BRIEF PROFILE ON LEI** which includes relevant information on the community in which LEI operates, what led to the establishment of the LEI, the mission of the LEI, what needs / problems are being solved by the LEI, how many persons are currently employed to the LEI. Also state the challenges being faced by the LEI and show how the grant will assist/impact.]

**SECTION 4: PROJECT AIM**

**[State the GENERAL CHANGE anticipated; the overall benefits and outcome to be achieved if project is implemented e.g. increased production of X; business registered and now on its way to becoming compliant/ increased efficiency, increase employment by X amount].**

**SECTION 5: PROJECT OBJECTIVES**

**[SPECIFICS OF THE PROJECT.... What will be achieved e.g. the purchase of 1 honey extractor, LEI registered with the Companies Office of Jamaica or the Department of Cooperatives and Friendly Societies etc]**



**SECTION 5: BENEFICIARIES**

**[Who are the direct and indirect beneficiaries of the grant e.g. x # of persons in LEI, X CDC/DAC/PDC who will benefit; and the residents in X community (ies), X agency/consultant/ supplier who will benefit indirectly]**

	Direct Beneficiaries	Indirect Beneficiaries
How Many?		
Who are they?		



**SECTION 6: BUDGET**

A				B			
Item	Quantity	Unit Cost \$\$	Total Cost \$\$	Amount Requested from SDC \$\$	Community Contribution \$\$	Other Funders \$\$	Total Cost \$\$
Honey Extractor	2	\$50,000	\$100,000	\$95,000	\$5,000	0	\$100,000
<b>GRAND TOTAL (A):</b>			<b>\$100,000</b>	<b>GRAND TOTAL (B):</b>			<b>\$100,000</b>

Note: Both Grand Total figures (A, B) must be identical.

Note: Please indicate the dollar value for Community contribution which can be in kind/ sweat equity.

**BUDGET SUMMARY**

- ✚ Amount Requested from the SDC: \$ \_\_\_\_\_
- ✚ Community Contribution: \$ \_\_\_\_\_
- ✚ Other Funders\*: \$ \_\_\_\_\_
- ✚ TOTAL PROJECT COST: \$ \_\_\_\_\_  
=====

**\*NOTE:** State below Name of other Funder and amount where applicable

Name of Funder	Amount donated to LEI	Date

**SECTION 8: SUPPLIER'S INFORMATION** [All Proforma invoices with TRN/ GCT #, Suppliers' contact details should be affixed to application form]. Insert summary information in table below

Name of Supplier	Item	Cost	TRN / GCT #

**SECTION 9: PROJECT IMPLEMENTATION SCHEDULE** [a plan describing the **sequence** of activities and resource allocation. Include timelines.]

Activity	Resource Allocation \$	Timeframe in weeks / Months										
		1	2	3	4	5	6	7	8	9	10	11

**SECTION 10: PROJECT MONITORING** [Indicate the activities to monitor the project throughout project implementation; highlight also the sustainability of the project]

**PROJECT MONITORING**

<b>PROJECT GOAL/AIM</b>	<b>PROJECT OBJECTIVE</b>	<b>ACTIVITIES</b>	<b>WHO IS RESPONSIBLE</b>	<b>EXPECTED OUTPUT</b>	<b>IMPACT</b>	<b>RISK</b>

## SECTION 11: Applicant's Accounting Information

<b>Financial Institution:</b>	
<b>Address:</b>	
<b>Account Name:</b>	
<b>Account Number</b>	
<b>Name of Account Signatories:</b>	
	1.
	2.
	3.

**DECLARATION**

I declare that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of my knowledge. Furthermore, we understand that the Grant Selection Committee may ask for additional information at any stage of the application process. We also understand that the SDC has the right to visit projects and speak publicly about the project and use the project as a part of any public relation material for the SDC both in the present and future. Additionally, I understand that the evaluation report regarding project activities, impacts, resources (including budgetary expenditure) and recommendations must be completed at the time so designated, and failure to do so will result in the Local Economic Initiative (LEI) being not able to access SDC's grant facilities for **minimum three years**.

Signature\* \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature\* \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

\* Signatures of Members from the LEI's EXECUTIVE

**SOCIAL DEVELOPMENT COMMISSION'S ENDORSEMENT**

Parish Manager's Name	
Signature	
Date	

CDO's Name	
Signature	
Date	

Supervisor's Name	
Signature	
Date	

Local Economic Development Coordinator's Name	
Signature	
Date	

## APPENDICES:

ATTACH THE FOLLOWING DOCUMENTS TO THE COMPLETED AND SIGNED APPLICATION:

**NOTE:** *Locate documents on Community Files maintained*

✚ LED Support Plan	
✚ Business Model	
✚ Business Plan ( <b>NB: <u>not mandatory</u> however an asset</b> )	
✚ Statement of Affiliation <i>where applicable</i>	
✚ Business Fair Attendance Register ✚ Capacity Building Session Attendance Register	
✚ LEI Listing as at 31 September 2018	<i>Master List maintained at SDC' Headquarters will be used to verify.. no need to attach Parish LEI Listing</i>
<b>OTHER DOCUMENTS</b>	
✚ Suppliers' <b>Proforma</b> Invoices	<i>NB: successful applicants will be asked to solicit original Invoice (s)</i>
✚ <b>If LEI is registered</b> , attach copy of the relevant documents such as, Articles of Association, Charter etc	

NOTE:

✚ **Please complete Application Form by typing responses into spaces provided. Thank you...**