The SREDA Go Money Entrepreneurship Competition provides grants to promising small business owners launching fresh ideas.

The program will accelerate the development of viable business ideas as well as support founding entrepreneurs' growth through an ongoing coaching relationship with SREDA's business development team. Go Money will be awarded to businesses that demonstrate originality, strong market potential and impact on the Saskatoon Region economy.

Before you apply, be sure you meet all <u>Eligibility Criteria</u>. For more information, please contact:

Jenelyn Ong Manager, Entrepreneurship jong@sreda.com

Disclaimer

Eligibility: SREDA employees, representatives and agents of the companies and organizations participating in the Go Money program as well as the immediate family members (spouse, children, parents and siblings) and those living in the same household of such employees, representatives and agents are not eligible to enter. Void where prohibited by law.

Consent and Release: Participants agree that SREDA may use their name, city of residence, video, photograph, image and/or likeness to create draft marketing or media material specific to the participant. These materials may be used to promote the Go Money program and can be provided to the participant for their own promotional activities.

Use of Business Information: Business information gathered by SREDA will be kept confidential and used for the purposes of administering and/or marketing of the program.

By submitting this application you agree to the above disclaimers.

Application Part A: Written Answers

All information provided will remain confidential and be used only for the purposes of grant selection. SREDA reserves the right to request additional information regarding your application.

A. Eligibility

1.	Is your business located in the <u>Saskatoon Region</u> ?		
	Yes	No	
2.	Is your business for profit?		
	Yes	No	
3.	. Has your business been operating for two years or less (as of August 17, 2021) or do you at least have a business idea?		
	Yes	No	
4.	Is your business inde	pendently owned, operated and created by you?	
	Yes	No	
5.	 Is your business registered (or eligible to register) with all industry and regulatory requirements (e.g. provincial corporate registry, municipal business license, industry licens up-to-date on all tax returns)? 		
	Yes	No	
6. Are you 18 years old or older?		or older?	
	Yes	No	
,	answered "No" to any	y of the above questions, you are inclinible at this time. Please step the	

If you answered "No" to any of the above questions, you are **ineligible** at this time. Please stop the application here. Thank you.

To get notified about future grants, subscribe to our <u>NEWSflash</u>. It's a free daily roundup of the most locally relevant business and economic news, sent directly to your inbox every weekday morning.



B. Applicant Information

C.

1.	First and Last Name*					
2.	2. Phone Number*					
3.	s. Email Address*					
Bu	Business Information					
1.	. Registered Business Name*					
2.	2. Operating Name (if different from Regi	stered Business Name)				
3.	3. Business Owner Name(s)* - please sep	arate owner names with a comma				
4.	1. Business Street Address*					
5.	5. Municipality (City, Town, Village or RM)	*				
6						
о.	5. Commercial or Home-based Business*					
	Commercial location Ho	me-based business				
7.	7. Business Online Presence					
	Website:					
	Facebook:					
	Instagram:					
	LinkedIn:					

D. Business Overview

- 1. Business Start Date*
- 2. Business Structure*

Sole Proprietorship

Partnership

Corporation

Co-operative

- 3. Number of Employees (including owners)*
 - a. Full-time employees (30+ hours per week per person):
 - b. Part-time/Casual employees (less than 30 hours per week per person):
 - c. Seasonal employees:
- 4. Primary Industry/Sector (select only one)*

Agriculture and Natural Resources

Construction

Food Service & Food Processing

Accommodation

Manufacturing (non-food)

Retail & Wholesale

Professional & Business Services

Personal Services

Other (please specify):

•	I		
5.	Please indicate if you and/or your business partners identify as a member of any of the following groups (select all that apply)*		
	2SLGBTQ+		
	Black Entrepreneur		
	Entrepreneur with a disability		
	Francophone		
	Indigenous		
	Newcomer/Immigrant		
	Visible Minority		
	Woman		
	Youth (ages 18-39)		
	Prefer not to say or N/A		
6.	6. Brief description of your business. Be sure to include how innovative or unique your business/idea is, your competitive advantage (i.e. what makes you different from competitors) and the problem you're solving. (max. 100 words)*		
7.	What are your top two goals for the next year of your business? Make sure your goals ar SMART (specific, measurable, achievable, relevant, and timely). Point form is encouraged (max. 100 words)*		
8.	Describe how the funds will be used for your business and how the grant will help you achieve your goals faster. (max. 100 words)*		

Application Part B: Budget Snapshot

Complete the Budget Snapshot template below for expenses over the three months after the competition. Expenses must be reasonable. They will be reviewed relative to the viability of your idea.

Examples of common startup expenses include:

- Business registration, licenses and permits (ex: ISC fees, municipal business license)
- Professional services/contract labour (ex: lawyer, accountant, consultant, graphic design)
- Marketing (ex: building signage, digital menu board, advertising expenses)
- Technology software/hardware (ex: accounting software, payment systems, email marketing, laptop)
- Operation costs (ex: business phone line, laptop, PO box rental)

Need Help? See sample Budget Snapshot

Budget Snapshot for Period of Nov 1, 2021 - Jan 31, 2022		
Item Description	Amount	
Total Expenses		

Budget Snapshot Questions

- 1. How much of your own money are you investing into your business? (enter total amount)*
- 2. Are you receiving any other funds from other sources (e.g. bank loan, private equity, other grants)?*

No Yes

If yes, please provide sources and amount of funding from each source.

3. Which expenses would you apply the SREDA Go Money cash towards? List expenses in priority order. Point form is encouraged. (max. 25 words)*

DECLARATION

By selecting I agree, you certify all information included in this application is true and correct to the best of your knowledge.

I agree

I do not agree

Submission Instructions

- Save completed application as Applicant Full Name Business Name (e.g. Jane Doe - SREDA)
- 2. Email application to Ashley Dean at adean@sreda.com with Subject: Go Money Application