



NunatuKavut Business Centre

Growing NunatuKavut business, one entrepreneur at a time.

TOURISM BUSINESS DEVELOPMENT GRANT

The Tourism Business Development Program provides funding assistance for clients to assist with business planning, start-up, expansion and marketing for their tourism business. This funding is available to qualified individuals on the recommendation of the Business Advisor and exists to enhance the ability of NunatuKavut entrepreneurs to participate in the growing tourism industry.

APPLICANT INFORMATION

Name: _____

Address: _____ SIN: _____

_____ Date of Birth (M/D/Y): ____/____/____

_____ Membership Number: _____

Email: _____ Telephone #: _____

Fax #: _____ Alt. Telephone#: _____

PROJECT INFORMATION

Business Name: _____

Is this business a new or existing business? New Business _____ Existing Business _____

Has this business been in operation for less than 6 months? _____

Assistance Needed:

Business Plan _____ \$6,875 Maximum	Start-Up Grant _____ \$9,000 Maximum	Expansion Grant _____ \$9,000 Maximum	Marketing _____ \$3,500 Maximum
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Description of work to be completed: _____

Please attach a description of the business or a copy of the organization's business plan as well as a signed invoice.

FINANCIAL INFORMATION

Please include a summary of the project expenses below, including contributions from other sources.

SUMMARY OF PROJECT COSTS	
Description	Amount (Provide invoices and receipts where applicable)
PROJECT FUNDING SOURCES	
Source	Amount (Provide proof of other sources where applicable)
1. Proposed Business Centre Contribution	
2.	
3.	
4.	

Have you been funded by the NunatuKavut Business Centre in the past 12 months? _____

If so, please indicate programs and amounts

CONSULTANT INFORMATION (FOR BUSINESS PLAN AND MARKETING PROJECTS)

Name: _____

Address: _____ Telephone #: _____

_____ Alt. Telephone#: _____

Email: _____ Fax #: _____

SIGNATURES

SIGNATURE: _____ DATE: _____

Please attach resume of consultant or have forward resume to the NunatuKavut Business Centre

*The NunatuKavut Business Centre mandate is to foster employment through entrepreneurship and to encourage NunatuKavut members to start their own businesses. If you require assistance completing this application, contact one of our offices at:
709.896.5722 ext. 205 or toll free 1866.446.5035.
709.938.7621 or toll free 1844.938.7621*

*Please return the first page of this application to the
NunatuKavut Business Centre:*

MAIL

SCAN AND EMAIL

FACSIMILE

P.O. Box 418, Station C,
Happy Valley - Goose Bay, NL, A0P 1C0

businesscentre@nunacor.com
nbc@nunacor.com

709.896.5739

NUNACOR OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____

IS THIS APPLICATION COMPLETE? Yes ____ No ____

**IF INCOMPLETE,
ITEMS MISSING:**

Proof of Membership _____
Consultant Description* _____
Required Invoices* _____
Online Client Package _____
Signed Invoice* _____
Proof of Funding* _____
*If Applicable

Date Received: _____
Date Received: _____
Date Received: _____
Date Received: _____
Date Received: _____
Date Received: _____

BUSINESS ADVISOR SIGNATURE _____

DATE: _____

CEO SIGNATURE _____

DATE: _____