|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** | Click on a date | | | | | | **Application Code:** | | | for WGRF use only | |
| **Proposed Asset/Title (Limit to 10 words):** | | | | | Click or tap here to enter text. | | | | | | |
| **Applicant Organization (Legal Name):** | | | | | Click or tap here to enter text. | | | | | | |
| **We are a public entity. Yes  or No** | | | | | | **We are able to issue a charitable tax receipt. Yes  or No** | | | | | |
| **Registered Charity (provide #):** | | | | CRA #: | | | | | **University:** | | **Yes  or No** |
| **Government (specify):** | | | **Federal  Provincial  Municipal** | | | | | **Other (specify):** | | Click or tap here to enter text. | |
| **Total Cost:** | | **$** | | | | **Requested Budget:** | | | | **$** | |

**PART 1: CONTACT INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PRIMARY LIAISON**   |  |  | | --- | --- | | **NAME**: | Click or tap here to enter text. | | **POSITION**: | Click or tap here to enter text. | | **ORGANIZATION**: | Click or tap here to enter text. | | **ADDRESS**: | Click or tap here to enter text. | | **EMAIL**: | Click or tap here to enter text. | | **PHONE**: | Click or tap here to enter text. | | **ROLE:** | Click or tap here to enter text. | | **SECONDARY LIAISON** (if applicable)   |  |  | | --- | --- | | **NAME**: | Click or tap here to enter text. | | **POSITION**: | Click or tap here to enter text. | | **ORGANIZATION**: | Click or tap here to enter text. | | **ADDRESS**: | Click or tap here to enter text. | | **EMAIL**: | Click or tap here to enter text. | | **PHONE**: | Click or tap here to enter text. | | **ROLE:** | Click or tap here to enter text. | |
| **SIGNING AUTHORITY**   |  |  | | --- | --- | | **NAME**: | Click or tap here to enter text. | | **POSITION**: | Click or tap here to enter text. | | **ORGANIZATION**: | Click or tap here to enter text. | | **ADDRESS**: | Click or tap here to enter text. | | **EMAIL**: | Click or tap here to enter text. | | **PHONE**: | Click or tap here to enter text. | | **ROLE:** | Click or tap here to enter text. | | **COLLABORATING ORGANIZATION (**(if applicable)   |  |  | | --- | --- | | **NAME**: | Click or tap here to enter text. | | **POSITION**: | Click or tap here to enter text. | | **ORGANIZATION**: | Click or tap here to enter text. | | **ADDRESS**: | Click or tap here to enter text. | | **EMAIL**: | Click or tap here to enter text. | | **PHONE**: | Click or tap here to enter text. | | **ROLE:** | Click or tap here to enter text. | |

**PART 2: NON-CONFIDENTIAL EXECUTIVE SUMMARY OF PROPOSED PROJECT (maximum ½ page)**

* Briefly describe, in plain language, the proposal outlined within this application including what is proposed, how it will be achieved and why it is important. This may be used in communications should the application be successful.

|  |
| --- |
| Click or tap here to enter text. |

**PART 3: THE ASSET (maximum 2 pages)**

Describe the proposed asset in full, including the major piece(s) of infrastructure or equipment (tangible asset) requested, installation requirements, upgrades, location, size and nature. Supporting documentation may be attached to include asset detail, floorplans, specifications, etc.

|  |
| --- |
| Click or tap here to enter text. |

**PART 4: PRODUCER IMPACT (maximum 2 pages)**

Describe expected benefit to Western Canadian crop producers. How will the asset be used to benefit producers in the broad scale of Western Canada? Which crops, and research disciplines will this asset be supporting? Supporting documentation may include recent past and current record of media stories, on-farm use, producer engagement, knowledge transfer by anticipated primary users of the requested asset in the past three years, presentations directed at producers.

|  |
| --- |
| Click or tap here to enter text. |

**PART 5: SCIENTIFIC IMPACT, USE and OUTCOMES (maximum 2 pages)**

Describe the scientific impact and feasibility of the proposed investment in terms of filling a gap, bottleneck, strategic enhancement or unique opportunity. Conversely, is there an impact of delay in acquisition of the asset? What is the research outcome expected to be achieved? How will the asset be used, by whom and how much will it be used? Explain why existing infrastructure within the organization and the region cannot be used to achieve a similar result. Supporting documentation must include list of organization’s current related assets and access to alternative asset(s).

|  |
| --- |
| Click or tap here to enter text. |

**PART 6: ORGANIZATIONAL CAPACITY (maximum 2 pages)**

Describe your organization, including its history, governance, achievements, and financial capacity. Supporting documentation includes recent annual report, organization and department (if applicable) strategic plan, description of human resource capacity including scientific, technical and administrative support. Documentation for non-public organizations must include most recent audited financial statement.

|  |
| --- |
| Click or tap here to enter text. |

**PART 7: ORGANIZATIONAL SUPPORT (maximum 2 pages)**

If successful with this proposal, describe how your organization is prepared and supportive to accept, maintain and dispose of the asset. Given the useful life expectancy of the asset, how will the costs of operation and maintenance be addressed? Describe the organization’s disposal plan for the asset. Supporting documentation, including Letters of Acknowledgement from the appropriate department and college heads, facilities management, station managers, boards, etc. will be required. Will organizations other than the applicant organization be using this asset and if so, who and how?

|  |
| --- |
| Click or tap here to enter text. |

**PART 8: TECHNICAL CAPACITY (maximum 2 pages)**

Describe the primary users of the proposed asset and how they will use it. Describe the users’ track record, including scientific and technical expertise relevant for using the proposed asset(s). Supporting documentation may include CV’s, listing of recent publications (3 years), grants and/or contracts (3 years).

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **PART 9: MILESTONES AND TIMELINES**  Provide an expected, realistic timeline for further planning, tendering, preparation, acquisition, fabrication, installation, building, training, active use, etc. for the proposed asset. Include all internal and external milestones for all processes. (payment terms will reflect milestones achieved and an offer expiry date will be provided). Supporting documentation may include more detailed description and diagrams. | |
| **Key Milestone** | **Completion Date** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

**PART 10: RISK MITIGATION (maximum ½ page)**

* Describe risks and mitigation measures to address these risks such as asset acquisition/installation/regulatory delays, inability to secure funding, etc.

|  |
| --- |
| Click or tap here to enter text. |

|  |  |  |
| --- | --- | --- |
| **PART 11: TOTAL BUDGET**  Provide a summary of proposed budgets in the following table, in Canadian currency. Please attach a detailed total budget outlining all costs and proposed funding sources by category and year, including taxes net of credits received. Attach supplier quotes, where applicable. Identify the specific costs that are proposed for WGRF funding. Overhead will be not be accepted by WGRF as a cost category for this program. | | |
| **TOTAL BUDGET SUMMARY** | | |
| **Funder** | **Confirmed (Yes/No)** | **Total $ Value** |
| Applicant Organization | Yes/No | $ |
| ***Request of WGRF*** |  | $ |
| Enter other funder | Yes/No | $ |
| Enter other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |
| Other funder | Yes/No | $ |

**PART 12: COMMERCIALIZATION POTENTIAL (maximum ½ page)**

* Is there any commercialization potential? Describe any commercialization and intellectual property expectations?

|  |
| --- |
| Click or tap here to enter text. |

**PART 13: SIGNATURE PAGE**

* A duly authorized representative from the applicant organization MUST sign this form. By signing as an authorized representative of the applicant organization, the undersigned hereby acknowledges submission of the information contained in this application and declares that the information provided in or with the application, to be, to the best of your knowledge, true, complete and accurate.

|  |  |
| --- | --- |
| Name: Click or tap here to enter text. | Title: Click or tap here to enter text. |
| Phone: Click or tap here to enter text. | Email: Click or tap here to enter text. |
| Signature: | Date: Click on a date. |