

EXHIBIT A-1 STANDARDIZED PROPOSAL FORM – PAGE 1

DEPARTMENT OF RESEARCH AND DEVELOPMENT
SUPPLEMENTAL FUNDING AWARDS FOR 2009-2010

Proposal Reference Number: _____ (For Department Use)

Name of Organization: _____

Project Title: _____

Mailing Address: _____

Physical Address: _____

Telephone: _____ Fax: _____

Organization E-Mail Address: _____

Contact Name: _____ Title: _____

Telephone: _____ Fax: _____
If different from above *If different from above*

Contact E-Mail Address: _____

This proposal is submitted for consideration under the following program area – **Please select just one:**

- Agriculture
- Tourism
- Business Development
- Energy
- Film
- Community Capacity Building

Amount Requested: \$ _____

Is your organization registered as a nonprofit? Yes No

Does your organization have a Board of Directors? Yes No

Does your organization have a corporate seal? Yes No

Please see documentation checklist on the last page

Federal Tax ID # _____ General Excise Tax # _____

AUTHORIZED SIGNEE(S) FOR AGREEMENT (organizational documents attached):

Legal Name (type or print clearly) Title Date Term Ends

Telephone (business) (residence)

Second Signee (if applicable)

Legal Name (type or print clearly) Title Date Term Ends

Telephone (business) (residence)

EXHIBIT A-1 - STANDARDIZED PROPOSAL FORM – PAGE 2

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ACKNOWLEDGEMENT

I, the undersigned, hereby certify that the information provided in this Department of Research and Development Solicitation for Proposal has been reviewed in its entirety and the affixed signature accepts responsibility on behalf of said organization to inform its members of the content herein. All terms and conditions of this Department of Research and Development Solicitation for Proposals shall be a part of any contract entered into as a result of this proposal.

Name (please type or print clearly)

Signature

Title

Date