**MICHAEL HILL MAPLE ENTREPRENEURIAL AWARD GUIDELINES**

It is the intent of this Foundation to promote the future of the maple syrup industry by funding a $550 entrepreneurial award to two eligible young maple producers in memory of Michael Hill, one of the founding members of the NYS Maple Foundation and longtime president of the Board. Grants are awarded based on the desire to develop a maple business to continue the tradition of maple syrup processing. To qualify, an applicant:

1. Applicants can be a new or expanding business and must be an owner/s of the business.
2. Must be between a young or beginning farmer between the ages of 15 to 35 years and a New York State resident.
3. Application must be received by October **1st** and include:
4. A completed and signed Michael Hill Entrepreneurial application for the current year (which is available online at [www.newyorkmaple.org](http://www.newyorkmaple.org)).
5. A detailed budget on how the funding will be spent.
6. An essay with no more than 3 pages addressing any or all of the following topics:
7. What does starting a maple business mean to you;
8. how will you use the funding and what benefits will it make to your operation
9. your past experiences with the maple syrup industry;
10. any other comments or points you wish to make, as this is your chance to let the committee know who YOU are!
11. A recent photo (will not be returned) with permission to use it in any NYSMF publication.
12. Must include a copy of a NYS Drivers License or other state identification.

Reimbursement requirements are proof of payment (invoice, copy of check, receipt, etc.) or verification of order from a maple equipment dealer.

Applications missing information will not be reviewed.

Please send all of the requested information postmarked by **October 1** to :

NYSMaplefoundation@gmail.com

**MICHAEL HILL ENTREPRENEURIAL MAPLE GRANT APPLICATION**

**Applicant's Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| DESCRIBE YOUR EXPERIENCE OR BACKGROUND IN MAPLE*: (Limit 250 Words or Less)* |
|  |

|  |
| --- |
| DESCRIBE YOUR FUNDING REQUEST IN DETAIL: *(Limit 250 Words or Less)* |
|  |

**MICHAEL HILL ENTREPRENEURIAL MAPLE AWARD APPLICATION**

|  |
| --- |
| DETAILED BUDGET |
| Expected Completion Date:Expense Detail (equipment):  |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| **TOTAL FUND** **REQUEST $** |

**Please attach all costs estimates for equipment.**

Are you willing to have your name/picture used in Maple and other publications? Y\_\_\_\_N\_\_\_\_

To the best of my knowledge, the material contained in this application and on additional pages is true and complete. I understand this information and all supporting documentation becomes the property of the New York State Maple Foundation, Inc. Board of Directors.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send all of the requested information postmarked by **October 1st**  to :

**NYSMaplefoundation@gmail.com**