



## **2011 EDUCATIONAL SEMINARS GRANT**

### **Program Goals**

The goal of this program is to assist West End BIZ business members and/or their staff with gaining additional knowledge and training through educational opportunities. This program will invest in the area's working force, encouraging them to apply what they learn to their own business models, thereby strengthening their business skills and contributing to the area's overall business success.

### **How the Program Works**

Educational Seminars Grants provide reimbursement of the fees or tuition costs associated with attending a pre-approved seminar. The educational seminars will have been promoted by the BIZ, or offered by another organization/educational institution and therefore determined to be of benefit to our business members. As a West End BIZ business owner, you decide which of the educational seminars would benefit your business. Fill out the attached application form and submit it to the BIZ office for approval. You may apply for yourself or on behalf of one of your staff members. Applications can usually be processed within 2 days.

Once you receive approval and confirmation of the grant amount from the BIZ, you register, pay your fee and attend the seminar. When your seminar is completed you submit a copy of your receipt to the BIZ and we process your reimbursement for the approved seminar fees. The maximum allowable grant per seminar is \$50 and each business may only apply for one grant every six months. Applications are accepted for approval on a first-come, first-served basis while funding is available.

You must attend the same seminar as applied for and approved in your application, unless there is a change by the organization offering the course. If this occurs, you will need to inform the BIZ to arrange for any adjustments. The reimbursement of fees will only take place after the session date. A receipt of payment and proof of attendance is required for the reimbursement to be processed.

### **Which Courses Are Eligible**

Seminars, courses and workshops that provide training on, but are not limited to: Workplace Health & Safety, Human Resources, Business Finance, Management, Marketing, Business Communications and Business Development. If you are not sure if a seminar/course is eligible for this grant, please call the BIZ office who will assess it for you. The final decision on eligibility rests with the BIZ Communications Committee.

### **Who Can Apply**

Members of the West End BIZ can apply for this grant. A member is anyone who owns or operates a business within the boundaries of the West End BIZ and pays business tax.

### **How to Apply**

Call the West End BIZ office at 954-7900 to have an application e-mailed, faxed or mailed to you. Or, stop by the office (581 Portage Ave) to pick one up. Grants are also available for download from our website ([www.westendbiz.ca](http://www.westendbiz.ca)).



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### APPLICANT INFORMATION

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

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Tax Roll Number \* : \_\_\_\_\_

\* (5 digit number provided by City on City of Winnipeg Business Tax Statement)

Attendee's Name (if different): \_\_\_\_\_ Title: \_\_\_\_\_

Attendee's E-Mail (if different): \_\_\_\_\_ Phone: \_\_\_\_\_

### EDUCATIONAL SEMINAR INFORMATION

Educational Seminar Name/Topic: \_\_\_\_\_

Date of Seminar: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Offered By: \_\_\_\_\_ Cost: \_\_\_\_\_

Briefly describe how this educational seminar will benefit your business, yourself or your staff?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### CERTIFICATION (To be completed by the BIZ Member)

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge and that I have read and understood the terms and conditions of the grant application.

Applicant's Name & Title (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### APPROVAL (West End BIZ use only)

Date Approved: \_\_\_\_\_ Amount Approved: \_\_\_\_\_ By: \_\_\_\_\_

Receipt Received: \_\_\_\_\_ Reimbursed On: \_\_\_\_\_ By: \_\_\_\_\_

Comments: \_\_\_\_\_