CO-OPERATIVE DEVELOPMENT INITIATIVE
- INNOVATION AND RESEARCH APPLICATION FORM -

For Co-operatives Secretariat use only
Date received:
Project Number:

Note: Please refer to the <u>Application Guidelines</u> **when completing this form.**

1. Title of Project

2. Applicant Information

Name of Organization/Applicant:
Mailing Address:
Telephone Number:
Website:
Fax Number:

Name of Designated Officer	**Name of Contact Person** (if other than Designated Officer)
Title:	Title:
Mailing Address:	Mailing Address:
Telephone Number:	Telephone Number:
Fax Number:	Fax Number:
Email Address:	Email Address:

3. Project Description

Objectives

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Background

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Activities

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Start and Finish Dates

Start date: [   ]   Finish date: [   ]

4. Results

Innovation

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Priorities

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Expected Outcomes

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Sharing the Results

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4. Project Management

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5. Partnership Information

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6. Budget

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7. Other Information Relevant to the Project

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Please email your completed application form to coops-progr@agr.gc.ca. If you prefer, you may send it by regular mail, courier or facsimile to:

Co-operative Development Initiative
Co-operatives   Secretariat
1341 Baseline Road
Tower 7, 6th Floor
Ottawa, Ontario
K1A OC5
Facsimile (613) 759-7489