

CLASS-OF-ONE TOURISM ENTREPRENEUR MENTORSHIP PROGRAM APPLICATION

PART A - APPLICANT INFORMATION

Registered Business Name: <i>(Including Tax # if applicable)</i>	
Contact: <i>(Name & Title)</i>	
Business Status: <i>(Eg: New, Existing)</i>	
Physical Location of Business:	
Mailing Address:	
Business Phone:	
Cell Phone:	
Email:	
Company Website: <i>(if applicable)</i>	
Company Social Media Link(s): <i>(if applicable)</i>	
Will your company operate seasonally or year-round? Elaborate.	
How many full-time, part-time and/or seasonal jobs do you anticipate your business will generate? What is your estimated annual payroll?	

PART B - APPLICANT READINESS

(Please feel free to attach documentation if necessary)

Explain how your tourism product/service/experience supports the 'sub-sectors' outlined on classofone.ca

Describe your experience and professional readiness for creation and delivery of your product.

Describe your personal and/or partnered investment situation with regard to your tourism product.

Explain the type of mentoring you feel you would most benefit your tourism product/service/experience.

Although not a requirement, preference will be given to submissions that include:

- Business plan along with financial projections as well as operating budget
- Marketing strategy supporting your tourism product/service/experience

PART C – APPLICANT DECLARATION

APPLICANT DECLARATION The information provided on this application form and any/all accompanying documentation is accurate to the best of my knowledge. I hereby give the Town of Florenceville-Bristol authority to verify any/all information pertaining to this application.

It is also understood this application of intent will be treated as confidential and content will only be disclosed with internal committees as required for consideration by the Town of Florenceville-Bristol.

APPLICANT:

NAME (PRINTED)

NAME (SIGNATURE)

DATE (MM/DD/YY)

STEPS TO SUBMIT AN APPLICATION

STEP 1: Download the Application

STEP 2: Once complete, save it and prepare all supporting documents (as outlined on application).

STEP 3: Submit your application and supporting documents by email to:
tourism@florencevillebristol.ca with the title "**Class-Of-One Application**" followed by your name.

Note: To submit a paper application, print it and mail it along with all supporting documents to
Tourism and Business Development Manager, 19 Station Road, Florenceville-Bristol, NB E7L 3J8

**Be sure to keep a copy of the completed and signed application for your records.*

INTERNAL USE ONLY - SCORING MATRIX (CLASS-OF-ONE Tourism Entrepreneur Mentorship)	POTENTIAL	ACTUAL
Product/service/experience aligns with and supports the Town of Florenceville-Bristol destination themes and strategic objectives	20	
Applicant has demonstrated experience in the delivery of the proposed product/service/experience in a timely manner	20	
Product/service/experience location has been identified/secured and is within the boundaries of the Town of Florenceville-Bristol	15	
Product/service/experience will generate incremental employment	15	
Applicant has demonstrated investment capacity and/or investment support and is ready to move forward	15	
Product/service/experience will operate year-round	15	
<i>BONUS: Applicant possesses 1) a registered business name and 2) a business tax # and 3) has shared a detailed business plan, and 4) financial projections, and 5) operating budget:(# 1 & 2 = 5 points total, # 3, 4 & 5 = 5 points each) Max. Total Bonus Points = 20.</i>	20	
TOTAL (Eligibility based on minimum 70%)	100 + bonus	

TOWN OF FLORENCEVILLE-BRISTOL APPROVAL:

NAME (PRINTED)

NAME (SIGNATURE)

DATE (MM/DD/YY)