

**CONFEDERATED SALISH AND KOOTENAI TRIBES**

**ECONOMIC DEVELOPMENT OFFICE  
SMALL BUSINESS ASSISTANCE PROJECT**

**FY 2021 GRANT APPLICATION GUIDELINES**

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**APPLICATION PERIOD:**  
January 4, 2021 – February 22, 2021

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ECONOMIC DEVELOPMENT OFFICE**

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**A. SUMMARY**

The Confederated Salish and Kootenai Tribes (CSKT) received a grant from the Montana Department of Commerce State Tribal Economic Development Commission to fund a Small Business Assistance Project on the Flathead Reservation. The Project includes a small grant fund designed to assist CSKT member-owned businesses—either existing or new--to improve economic conditions for the Flathead Reservation and for Tribal members.

Small grants, ranging from \$2,000 to \$7,000 each, are available on a competitive basis. Similar to the state's Indian Equity Fund, the CSKT grants can be used for a variety of activities such as the purchase of new equipment or the development of a new product line.

**B. APPLICATION PROCESS**

**Eligible Applicants**

The funds are available only to enrolled members of the Confederated Salish and Kootenai Tribes who live on or near the Flathead Indian Reservation. All applications must include documentation of Tribal enrollment in the form of a Certified Indian Blood (CIB) Form or Tribal ID.

The funds must be used for businesses located ON the Reservation, and the business must be at least 51% Tribal member(s) owned.

**Eligible Uses of Funds**

Funds can be used for the kinds of activities usually funded by a commercial lender. These activities may include but are not limited to:

- Purchase of land, building and equipment
- Purchase of assets including furnishings, equipment, materials, and technology

When applying, existing business owners must show how the funding will support growth in their business, either through the development of a new project or through their existing business strategy. New business owners must show how

the funding will support the success of their start-up idea. The applicant must describe this in the Business Plan narrative, financial information and financial projections.

### **Ineligible Activities**

The following will not be funded:

- Reimbursement for activities completed prior to submittal of the grant application and completion of a contract with CSKT.
- Requests for working capital only. Working capital requests must be < 10% of requested amount.

### **Maximum Funding and Required Match**

CSKT will provide several grants, ranging in amounts from \$2,000 to \$7,000. The business owner/applicant must provide a minimum dollar-to-dollar match that must be firmly committed. A loan commitment, such as from a local bank, is an acceptable form of match. Collateral from the business owner, either cash or in-kind, is also an acceptable form of match. In-kind match can include inventory, supplies, equipment, tools or vehicles that are used for the business.

**The funds requested and the proposed matching funds must be clearly documented in the application cover letter.**

### **Application Requirements**

Applications **MUST BE TYPED**, and will be accepted by the CSKT Economic Development Office at the Tribal Complex beginning January 4, 2021, and must be postmarked or hand-delivered no later than February 22, 2021. Applications will be recorded with date and time received.

The documentation required for a grant award is similar to the criteria required by a bank for a commercial loan. **Businesses that apply for a grant are required to provide an original and four copies of the items listed on the following page:**

**Typed applications MUST INCLUDE the following (including an original and four copies):**

- a. A **Cover Letter** that states the amount of funding requested, its purpose (how the funding will be used—not solely for operating capital), and a detailed description of the match to be provided (including documented dollar value(s) of any equipment, inventory, real estate or automobiles being pledged as match). If cash is being pledged, provide a copy of a current bank statement that shows funds are available for business use.
- b. A **Business Plan** that, at a minimum, describes all of the following: the nature of the business, its product or service, market, customers and competition, the business strategy for the next three years, a marketing plan, and a three-year cash projection. (This will aid the committee in determining whether the business will generate the cash flow needed to operate the business.)
- c. A personal profile that outlines the background and experience of each of the principals working in the business, in resume form
- d. Copies of documents that add value to the application and support the information contained in the Business Plan, such as a lease, contract, invoices, vendor quotes, letters of reference, personal or business assets such as inventory, equipment, accounts receivable, real estate
- e. **Documentation of CSKT enrollment**--either a Certified Indian Blood (CIB) Form or a copy of an official Tribal ID. Documentation must show the Tribal ID number.
- f. **Tax Returns** for the last two years, if available
- g. **Financial statements, both personal and business**
- h. Completed **Applicant Certification and Contact Form** (see last page of this packet, Exhibit I—Please DO NOT RE-TYPE the FORM)
- i. If a loan is included as match, include a copy of the repayment plan or outline a repayment schedule. (This must be shown by line item in the three-year cash projection included in the Business Plan.) Include copies of papers that support the information and collateral used to secure the loan. Collateral can include either personal or business assets such as inventory, equipment, accounts receivable, real estate and automobiles.

**Incomplete applications will not be accepted.**

**Submit the original application packet and four copies of the entire packet to:**

**Janet Camel  
CSKT Economic Development Office  
P.O. Box 278  
Pablo, MT 59855  
(406) 675-2700, ext. 1256  
[janet.camel@cskt.org](mailto:janet.camel@cskt.org)**

Applicants may address any questions regarding the application to Mrs. Camel or to:

**Tina Begay  
Phone: (406) 544-1245  
[tkbegay@gmail.com](mailto:tkbegay@gmail.com)**

**Applications considered incomplete or ineligible after February 22, 2021, will be returned to the applicant and not be considered for funding. Applications that are not typed will not be accepted.**

### **C. APPLICATION REVIEW PROCESS**

Applications will be accepted NO SOONER THAN January 4, 2021, by the Tribal Economic Development Office. All complete and eligible applications received by February 22, 2021 (post mark date), will be considered on a competitive basis.

Receipt of an application does not imply a commitment for funding. Applications will be reviewed for eligibility and appropriateness with program requirements by a local review committee comprised of banking and finance experts.

The grant review process is extensive. Ranking the applications may require several weeks.

#### **Initial Screening**

The review process includes an initial screening by Economic Development Office (EDO) staff members who will check to insure that each application is complete according to the checklist on page 4. If an application is submitted early and is determined to be incomplete, EDO staff will contact the applicant and allow the missing information to be submitted, as long as the missing information is received by the deadline.

#### **Review Committee**

After the deadline and initial screening, all complete and eligible applications will be reviewed by a local committee composed of members from local lending institutions and one member from the Montana Department of Commerce. Review committee members from local banks volunteer their time to review the applications.

### **Review Criteria**

After their individual review of the applications, Review Committee members meet to review policy and application requirements, and recommend approval or disapproval of the grant awards based on the following criteria:

1. Quality of the application
2. Business experience of the applicant
3. Financial projections
4. The business and marketing plan
5. Quality of the match
6. Financial need

**Financial Need.** The grant fund is designed to assist the new business start-up and the small business that is growing. If the review committee finds the applicant has sufficient wealth (business and/or personal assets) that would allow the applicant to easily access funding through a commercial lender, local economic development organization or other gap financing, the committee may deny the application as outside the scope of the program. An applicant who has already received a small business grant, either from the Montana Indian Equity Fund or from the Confederated Salish and Kootenai Tribes, will be considered as a lower priority for additional grant funding, depending on the number of applications received during this grant period.

### **D. DISBURSEMENT OF FUNDING**

The grant awards will be dispersed by the CSKT Economic Development Office, following recommendation by the review committee and approval by the Tribal Council. A letter will be sent to each grant applicant stating whether or not their proposal was approved for funding. While it is the intent of the program to have funding available as soon as possible, for business planning purposes please do not expect funds to be available until a few months after receiving an award letter.

Funding is granted through a contract and invoice process, and grant payments can take several weeks to process after a contract is signed. Grants cannot pay

for any expenses incurred prior to completing a signed contract with the Confederated Salish and Kootenai Tribes.

The following will be required before a contract can be completed:

- Two original copies of a signed W-9 form
- Four original copies of a signed Contractor Agreement, which includes an agreement to complete reporting requirements (This will be provided by the Economic Development Office.)
- Proof of General Liability Insurance
- Proof of Automobile Liability Insurance, if a vehicle is used for the award recipient's business
- Proof of Workers' Compensation Insurance for employees (if not a sole proprietor)

After the contract is approved by the Tribal Chairman, the grant recipient will provide:

- An Invoice(s) for the service(s) or item(s) requested for funding by the grant, as described in the application proposal
- A corresponding receipt(s), invoice(s) or formal documentation of the cost and payment of the service(s) or item(s) requested for funding in the invoice(s)

## **E. BUSINESS ASSISTANCE RESOURCES**

To assist applicants with the preparation of the application, there are two types of resources available: (1) one-on-one business counseling; (2) business management courses.

Business counseling is available from:

- Tina Begay at 544-1245
- James Bible or Sam Wall at S&K Business Services north of Pablo, 883-4317
- Small Business Development Center at the Lake County Community Development Corporation in Ronan, 261-3200

Business management classes are offered at the following locations:

- Salish Kootenai College Business Department in Pablo, 275-2853
- *Flathead Valley Community College*, SBDC Director, [sbdc@fvcc.edu](mailto:sbdc@fvcc.edu). (406) 756-3836

**Best wishes for a successful proposal!**

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**Exhibit I**

**CSKT Small Business Assistance Project**

**Applicant Certification and Contact Form**

**The Applicant hereby certifies that:**

**ACCEPTANCE OF THE FUND PROGRAM REQUIREMENTS**

The applicant will comply with all requirements established by the Confederated Salish and Kootenai Tribes, and applicable Tribal and State laws, regulations, and administrative procedures.

The applicant accepts the terms, conditions, selection criteria, and procedures established by the Confederated Salish and Kootenai Tribes – Small Business Assistance Project and expressly waives any statutory or common law right the applicant may have to challenge the legitimacy and propriety of these terms, conditions, criteria, and procedures in the event that the applicant is not selected for an award of funds.

**APPLICANT CERTIFICATION**

**To the best of my knowledge and belief, the information provided in this application and in the attached documents is true and correct.**

Name \_\_\_\_\_  
(Typed or Printed Name)

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

**Contact Person for Further Information:**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Amount of Grant Funds Requested \$ \_\_\_\_\_