# Tourism Attraction Grant Program

NOFO ID: 2168-2933

Directions: Complete this program application and submit as part of your application to the Tourism Attraction Grant Program. Detailed information on the program and submission requirements can be found in the Notice of Funding Opportunity. If necessary, additional pages may be attached.

**Legal/Common Name:** Click or tap here to enter text.

1. **Provide a detailed project description including the viability of the attraction, why funds are needed, and whether the project is located within 30 miles of an area with supporting visitor services. For capital projects, provide a geographic and physical address location for the tourism attraction. For capital projects with infrastructure components, provide how the project will enhance the visitor amenities and experience and increase visitation to the tourism attraction.**

Click or tap here to enter text.

1. **Describe how the project has the potential for sustainable economic growth and job creation, or a significant impact on the area’s overall tourism efforts.**

Click or tap here to enter text.

1. **Describe if the project will be completed and open to the public with regular scheduled hours at the end of the grant period.**

Click or tap here to enter text.

1. **Describe if and how the project will increase expenditures from additional visitors to generate a return on investment (ROI) for the State within three years.**

Click or tap here to enter text.

1. **Describe how the tourism attraction is currently being marked or will be marked to visitors outside of a 50-mile radius.**

Click or tap here to enter text.

1. **Describe how the costs itemized on the uniform budget are reasonable and necessary to enhance or develop the tourism attraction.**

Click or tap here to enter text.

1. **Describe how the project will adequately track and evaluate successes and outcomes.**

Click or tap here to enter text.

1. **Describe how the attraction meets the definition of a tourism attraction as defined as fishing and hunting areas, State parks, historical/cultural sites, areas of historic or scenic interest, museums, recreation areas, botanical gardens, theme/amusement parks, interpretive programs and other facilities or businesses which attract or serve visitors that are open to the public for a minimum of 100 days per year (if the tourism attraction is entirely event-driven, then it shall be open for a minimum of 200 hours per year), and are marketed and promoted to visitors from more than 50 miles away.**

Click or tap here to enter text.

1. **Describe how the project will increase visitation, length of stay and/or tourism expenditures from outside 50 miles.**

Click or tap here to enter text.

1. **Describe the overall effectiveness of the project.**

Click or tap here to enter text.

**Programmatic Risk Assessment (required):**

This information will be used in conjunction with responses in the program application to analyze programmatic risk.

**Financial Stability:**

1. **How significant is the funding need in relation to your overall organizational budget?**

Click or tap here to enter text.

**Management Systems and Standards:**

1. **Have there been any significant changes in your organization in the last fiscal year related to, if yes check all that apply:**

Leadership

Significant Program/Grant Initiative

Structural structure

Fiscal changes

Statutory or regularity requirements

Other, please explain: Click or tap here to enter text.

1. **Does your organization have written policies and procedures that guide program delivery on the following topics, click all that apply:**

Quality assurance

Outcome tracking and reporting mechanisms.

Relevant documentation of services/goods delivered.

Staff performance management policies and procedures

Personnel policies and procedures that include conflict of interest statements.

Complaint/grievance resolution policies and procedure

Governing body policies and procedures that includes conflict of interest statements.

Safeguarding funds, property, and other assets against loss from unauthorized use or disposition

Management of grant term extensions, where applicable

1. **Does your organization have internal controls that govern program delivery on the following topics, click all that apply:**

Quality assurance reporting

Appropriate (to industry) supervision of staff

Unit costs analysis and management

Accreditation/licensing compliance program

**History of Performance**:

1. **How many years of experience does the project leader/key staff member have managing the scope of services required under this program?**

3 years or more

1-2 years

Less than 1 year

**Capacity:**

1. **What is the staffing plan for the program implementation, are there reasonably planned resources available?**

Click or tap here to enter text.

1. **Will the grant funds be less than 25% of the organizations budget?**

**Yes**

**No**

**Reporting:**

1. **Does the organization have adequate resources to meet reporting requirements such as identifying a designee to oversee performance reporting? Is there a separation of duties to ensure accurate, and validated reporting?**

**Yes**

**No**

1. **Are there mechanisms in place to ensure accuracy and integrity to data points collected, verified, and reported?**

**Yes**

**No**