

# 2019 BBEDC Community/Group Training Application

---

In order for an organization to receive Community/Group Training funds, this application must be filled out and submitted to BBEDC for approval. Upon approval, BBEDC will notify the applicant. *Approved applications must provide a list of class participants and the community they reside in along with an invoice for reimbursement. High resolution pictures of the students participating in the training must also be submitted.*

## Required Information

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

Name & Address of Entity Requesting Assistance:

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

Specific Contact Person:

Name & Title: \_\_\_\_\_

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

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

E-mail Address: \_\_\_\_\_

Name of the course: \_\_\_\_\_

Dates of the course: \_\_\_\_\_

How is the course fisheries related and/or considered capacity building?

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

How will this course benefit the community or region?

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

---

---

---

**Provide a brief description, including the timeline for the course and tell us if there are any certifications or college credits involved.**

---

---

---

---

---

**Is this actually a vocational course or more in line with higher education?**

---

---

---

---

---

**What additional sources of funding are being sought or provided?**

---

---

---

---

---

---

Please provide a detailed budget complete with individual line items. Use additional page if necessary.

Item	Cost/Per Person	Total Cost Per Item
<b>Total Cost of Class</b>		
<b>Other Available Funds</b>		<b>Amount</b>
<b>Total Other Available Funds</b>		
<b>Total Cost of Class</b>		
<b>Less Other Available Funds</b>		
<b>Total Amount Requested from BBEDC</b>		

What is the cost to the students attending this course? Please include any test fees or other cost for students to complete certification if applicable.

---



---

How did you learn about this program?

Liaison Website BBEDC Program Other Describe Other  
Staff Directory

**For BBEDC use only:**

Date Received:	Approved	Denied	
	Justification:		
	Signature		Date