

## CANADA BEEF DOMESTIC MARKET DEVELOPMENT PARTNER PROGRAM APPLICATION FORM

## **Application Process**



Complete Sections 1-5 of the application form. Submit to Canada Beef Domestic Market Program Manager for review, approval and project number assignment.



Within 30 business days of project completion, expenses and supporting documentation (including quotes, receipts, proof of payment [e.g., cheque copy, credit card statements], etc.) must be submitted to Canada Beef to be eligible for funding.



Retain original receipts for your files.



Within 30 business days of project completion, fill out and complete Section 6 of the application form and submit to Canada Beef alongside project expenses and supporting documentation to be eligible for funding.





| I.1 Applicant Information                |                      |                   |                               |      |
|--|----------------------|-------------------|-------------------------------|------|
| egal Name of Company                     |                      | Website           |                               |      |
| uddress                                  |                      |                   |                               |      |
| City / Town                              |                      | Province          |                               |      |
| Country                                  |                      | Postal Code       |                               |      |
| .2 Primary Contact                       |                      |                   |                               |      |
| irst Name                                | Last Nam             | ne                |                               |      |
| ïtle                                     | Primary Phone Number | Email             |                               |      |
| Same as Primary Contact First Nar        | me                   | Last Na           | ame                           |      |
| tle                                      | Primary Phone Number | Email             |                               |      |
| .4 Type of Business (Check all that appl |                      |                   |                               |      |
| Primary Processor                        | Secondary Processo   | r                 | Further Processor             |      |
| Integrated Supply Chain Partner          | Canadian Beef Brand  | d Owner           | Wholesale Purveyor            |      |
| Distributor                              | Portion Cutter       |                   | Case-ready Operator           |      |
| Retail Operator                          | Foodservice Operato  | or                | E-Commerce Platform           |      |
| Other (specify)                          |                      |                   |                               |      |
| .5 Supply Partners                       |                      |                   |                               |      |
| 1  | 1                    |                   |                               |      |
|  | 2                    |                   |                               |      |
|  |                      |                   |                               |      |
| 2<br>3<br>4                              | 4                    |                   |                               |      |
| 3  | 4<br>Fe              | derally Inspected | Beef Supply Partner Establish | nmen |



| Project Strategy check appropriate boxes)     | Branded Unbranded  |            |             |
|---|--------------------|------------|-------------|
|   |                    |            |             |
|   |                    |            |             |
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|   |                    |            |             |
|   |                    |            |             |
| escribe Project or Campaig                    | jn                 |            |             |
| arget Market Distribution                     | Regional National  | Provincial |             |
| (check appropriate boxes)                     | Tiegional National | Trovinoidi |             |
| 2 Project or campaign tir                     | ning ———           |            |             |
| art Date (YY/MM/DD)                           | End Date (YY/MI    | M/DD)      |             |
| 3 Target Segment (check                       | appropriate boxes) |            |             |
| Retail  | Food Service       | Hotel      | HMR         |
| E-Business                                    | Take-Out           | Meal Kits  | Institution |
| Other (specify)                               |                    |            |             |
|   |                    |            |             |
|   | priate boxes)      |            |             |
| Approach (check appro<br>Business to Business | Business to Consum |            |             |



Section 3 - Project Objectives -3.1 Corporate Marketing Resources New Resources Update Existing Photo Shoot Web Components **Product Specification Resources** Other (specify) 3.2 Branded, Co-branded or Generic Resources Features / Benefits POP Materials Labels Menu / Tabletop E-Business Packaging Other (specify) 3.3 Advertising Initiatives (Design Only) Social Media Print Radio  $\mathsf{TV}$ Outdoor Truck Wrap Other (specify)  $oxedsymbol{ ilde{-}}$  3.4 Marketing and Sales Promotion Sampling / Tasting Partnership / Collaboration Recipe Program Other (specify)



| 4.1 Authorization  |                    |                      |                     |
|--|--------------------|----------------------|---------------------|
| certify that the information given on the application form is true<br>all activities and services claimed have been received and utilize |                    |                      |                     |
| Authorized Company Representative  |                    |                      |                     |
| First Name   | Last Name          |                      |                     |
| Title  |                    |                      | et Application Date |
| ls your company applying for funding from another source?  | Yes No             | (yy/mm               | vaa)                |
| f yes, provide details   | Signature:         |                      |                     |
| Has a Canadian Beef Logo and Trademark License Agreement I   | been completed? Ye | es No                |                     |
| 4.2 Canada Beef approval (internal use only)   |                    |                      |                     |
| Project Approval Date py/mm/dd)  | Partner Pr         | ogram Project Number |                     |
| Client Manager   |                    |                      |                     |
| Fitle:   | Signature:         |                      |                     |
| Section 5 - Budget and Completion Date   |                    |                      |                     |
|  |                    |                      |                     |
|  |                    | Total Cost           | Approved Cos        |
| 1 2  |                    | Total Cost           | Approved Cos        |
| 1<br>2<br>3  |                    | Total Cost           | Approved Cos        |
| 1<br>2<br>3<br>4<br>5  |                    | Total Cost           | Approved Cos        |
| 1<br>2<br>3<br>4<br>5  |                    | Total Cost           | Approved Cos        |
| 1<br>2<br>3<br>4<br>5<br>6<br>7  |                    | Total Cost           | Approved Cos        |
| 1 2 3 4 5 6 6 7 8 9  |                    | Total Cost           | Approved Cos        |
| 1 2 3 4 5 5 6 7 8 9 0 1  |                    | Total Cost           | Approved Cos        |
| 1 2 3 4 5 6 6 7 8 9 0 1 1 2 2  |                    | Total Cost           | Approved Cos        |
| 1 2 3 4 5 5 6 6 7 8 9 0 1 2 3 3 0 0  |                    | Total Cost           | Approved Cos        |
| 2 3  |                    | Total Cost           | Approved Cos        |
| 1 2 3 4 5 5 6 6 7 8 9 0 1 2 3 3 0 0  | Total (            |                      | Approved Cos        |



## - Section 6 - Measures of Success -

| - 6.1 Results (provide measures for all that apply) |                |     |  |  |  |  |  |
|---|----------------|-----|--|--|--|--|--|
| Performance Measures (enter a numeric value or n/a) |                |     |  |  |  |  |  |
| Size of reach, circulation or readership            | Number         | N/A |  |  |  |  |  |
| Website or social media views or hits               | Number         | N/A |  |  |  |  |  |
| Corporate marketing resources created               | Number         | N/A |  |  |  |  |  |
| Branded/co-branded resources created                | Number         | N/A |  |  |  |  |  |
| Trade or consumer advertising initiatives completed | Number         | N/A |  |  |  |  |  |
| Marketing and sales promotions completed            | Number         | N/A |  |  |  |  |  |
| Sampling Tasting events completed                   | Number of days | N/A |  |  |  |  |  |
| Estimated Sales Value increase                      | (CAD)          | N/A |  |  |  |  |  |
| Estimated Sales Value increase (year-over-year)     | (CAD)          | N/A |  |  |  |  |  |
| Estimated Sales Volume increase                     | Volume (kg)    | N/A |  |  |  |  |  |
| Estimated Sales Volume increase (year-over-year)    | Volume (kg)    | N/A |  |  |  |  |  |
| New leads   | Number         | N/A |  |  |  |  |  |
| Other metrics                                       | Metric         | N/A |  |  |  |  |  |

6.2 Other Results (provide measures for all that apply)

Describe any potential new Canadian Beef Promotion opportunities (as part of your company value proposition) as a result of this project.

Did this project increase the awareness of Canadian Beef food safety and quality assurance systems with your intended target audience.

Yes

No

Other results please specify

Feedback suggestions for improvement