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| **APPLICANT INFORMATION:** |
| INDIVIDUAL/ORGANIZATION NAME (financially responsible for project): |
|  |
| PHYSICAL ADDRESS OF PROJECT | State Rep District | State Senate District |
| CITY | STATE | ZIP CODE | COUNTY |
|  |   |   |   |
| MAILING ADDRESS (if different from physical) |
|  |
| CITY | STATE | ZIP CODE |
|  |   |   |
| **PRIMARY POINT OF CONTACT** |
| NAME |
|  |
| TITLE |
|  |
| PHONE | EMAIL ADDRESS |
|  |  |
| **GRANT DETAILS:** |
| **Purpose:** | To provide partial funding in the form of grants to established Grade A dairy producers in the state for facilities, equipment, and upgrades directly related to increasing efficiency and growing the dairy industry. |
| **Award Amount:** | 75% of total project expense, up to $40,000. |
| **Application Deadline:** | **No later than 3 p.m. November 19, 2025** |
| **Award Date:** | December 31, 2025 |
| **Project Timeline:** | Projects should be complete no later than June 30, 2026, with priority given to projects demonstrating near-term impact. |
| Please review the **Dairy Producer Grant Program Guidelines**, located on our website, for full program details including eligibility, restrictions, timeline, and project examples. |
| **SCORING CRITERIA:** (100 Points Possible) |
| **Credibility and Merit:** *(40 Points Possible)* | Projects should meet the intent of the grant, offering a clear scope of work that increases dairy production. Applicants should show previous history of similar efforts, with a background in farming that will allow for the success of the project.  |
| **Impact Potential:***(50 Points Possible)* | Projects must clearly define the impact to the applicant’s dairy operation and be able to demonstrate measurable outcomes once the project is complete, including but not limited to operational efficiencies, safety improvement and revenue growth potential.  |
| **Timeliness:***(10 Points Possible***)**  | Projects must demonstrate a feasible work plan and clear timeline for completion. Projects will be evaluated on the immediacy of impact to the applicant’s dairy operation.  |
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| **PROJECT TITLE**Please provide a descriptive title in 10 words or less. |
|  |
| **PROJECT DESCRIPTION**Please provide a brief summary of your project. *(250 words or less)* |
|  |
| **APPLICANT DESCRIPTION – CREDIBILITY and MERIT (40 points possible)**Please provide a short description of you or your operation’s goals, background, and its near-term impact on the Missouri dairy industry. Include examples of any other similar efforts that have allowed for increased dairy production.  |
|  |
| **PROJECT IMPACT POTENTIAL (50 points possible)**In the space below please identify the specific need(s) that this project will address in the applicant’s farming operation. This can include, but is not limited to, new efficiencies, improved herd genetics, improved safety, or new revenue potential. |
|  |
| **WORK PLAN – TIMELINESS (10 points possible)**Please provide a brief description of the work plan, including a timeline. |
| PROJECT START DATE:  | PROJECTED COMPLETION DATE: |
|  |  |
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**ATTACHMENT A**

**Certification of Information and Business Relationships:**

Pursuant to the “Guidelines and Application Format” document for the “Dairy Producer Grant Program” administered by the Missouri Agricultural and Small Business Development Authority (MASBDA), the applicant(s) (signing below) hereby certifies, subject to penalties of perjury, the following:

I certify that I am not: (i) an employee of the Missouri Department of Agriculture with a substantial interest of ten percent or more in the project described in the grant application, (ii) a member of the Missouri General Assembly with a substantial interest in the project described in the grant application, (iii) a state-wide elected official with a substantial interest in the project described in the grant application, (iv) a director of a state department with a substantial interest in the project described in the grant application, (v) a parent, child, spouse or sibling of any of the above either of who has a substantial interest in the project described in the grant application, whether singularly or collectively of 10 percent or more.

In addition, by affixing my/our signature(s) to this application, I/we certify having read and understand the guidelines governing award of these grants and agree to all conditions set forth therein and attest that all information contained in this application package is true to the best of the applicant’s knowledge, information and belief.

If awarded, grant payments by MASBDA for expenditures approved in the work plan may be made on a reimbursement basis to the grant recipient (after proof of payment is received by MASBDA) or directly to the vendor contracted by the grant recipient upon receipt of an invoice approved by the grant recipient. Any vendor invoice paid by MASBDA are for the benefit of the grant recipient for its obligations owed related to the approved work plan, and in no way constitutes a partnership, creditor, or other business relationship between MASBDA and vendors contracted by the grant recipient.

The grant recipient will be responsible for any federal or state taxes applicable for funds received, if awarded, and it is recommended the applicant consult their tax professional prior to submitting an application, and upon potential award.

Should a grant be awarded, basic project information (such as grant amount, proposed location, work products funded, etc.) may be used in announcements, press releases and other public information.

In addition to the final project report, MASBDA reserves the right to conduct a follow-up survey of funded projects to determine long-term economic impacts.

The Missouri Agricultural and Small Business Development Authority reserves the right to modify or terminate any subsequent agreements with applicant if, at a future date, the authority becomes aware of misrepresentation(s) contained in this application.

**Statement of Potential Funding Sources:**

Have you applied for or received any other grant funding for this particular project or any component of this particular project?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

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**Confirmation of Cash Contribution toward Cost of Grant Funded Project:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, authorized representative of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(grant applicant) confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (grant applicant) will contribute $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(must be a minimum of 25% of the total project cost shown on the Budget Summary) toward the cost of the grant-funded project. Appropriate copies of invoices and canceled checks will be provided to MASBDA. Final disbursement of grant funds cannot be made until the 25% cash obligation is satisfied.

**ATTACHMENT B**

**Project Budget Summary**

***Please provide as much detail as possible.***

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| --- | --- | --- | --- | --- | --- |
| **Expenditure**  |  | **A. MASBDA Request** | **B. Cash Match Contributed by Applicant** | **C. Other Grant Funds** | ***Total: A-C*  Total Project Cost**  |
| **Facility**   |  |  |  |  |  |
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| **Equipment**   |  |  |  |  |  |
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| **Breeding/Reproduction Technologies**   |  |  |  |  |  |
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| **Herd Expansion** |  |  |  |  |  |
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| **Total** |  |  |  |  |  |

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| **Services Available to Veterans - Optional:**1. Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable?     Yes      No

 1. If answering Question #1 in the affirmative, would you like to receive information and assistance regarding veteran’s benefits and services?     Yes     No

 1. If answering Question #2 in the affirmative, may the agency share your contact information with the Missouri Veterans Commission in order to provide you with information regarding available veterans benefits and services?  General information may also be found on the Missouri Veterans Commission’s website at: [www.veteranbenefits.mo.gov](http://www.veteranbenefits.mo.gov/)      Yes     No
 |
| By signing this application, I acknowledge I have read the Dairy Producer Grant Program Guidelines, and that all information and business projections included in this application are true, correct, and complete to the best of my knowledge.Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Completed Dairy Producer Grant applications should be forwarded to: Missouri Agricultural and Small Business Development Authority3600 Country Club Drive, Ste 2004 (shipping and physical address)P.O. Box 630 (mailing address)Jefferson City, MO 65102Fax: (573) 522-2416Email: masbda@mda.mo.gov **To be considered for funding, MASBDA must receive electronic submission or one hard copy of the Dairy Producer Grant application no later than 3:00 p.m. on November 19, 2025. No exceptions.** Late or incomplete applications will not be considered for funding. MASBDA reserves the right to reject any application prior to scoring if incomplete.To review the full program guidelines, visit our website at masbda.com. If you have any questions, please call (573) 751-2129. |

Checklist:

* Application – completed and signed?
* Attachment A – reviewed and completed?
* Project Budget Summary – completed and reviewed?
* Have you called the MASBDA office with any questions before submitting your application?

Missouri Agricultural and Small Business Development Authority (MASBDA)

3600 Country Club Drive, Ste 2004

PO Box 630

Jefferson City, MO 65102

(573) 751-2129

masbda@mda.mo.gov

masbda.com