

## Guidelines

- Scholarship grant amounts are up to 50% of the costs for tuition, fees, and required materials, with a maximum grant amount of \$500 per year, per business (travel expenses are not included)
- Documentation of completion of the course and proof of payment are needed prior to reimbursement
- Employees and owners must receive approval prior to registration for the course
- Scholarship grants are awarded as funding allows

## Process

- Return a fully completed application to the Economic Development Department; Applicant will be notified of approval within a week
- Upon successful completion of the course, submit proof of course completion and proof of payment to the Economic Development Department
- Approval and reimbursement normally takes 2-4 weeks

# SMALL BUSINESS SCHOLARSHIP GRANT

The Small Business Scholarship Grant program provides reimbursement for a wide range of business training to Westminster's entrepreneurs and small businesses.

4800 W. 92nd Avenue  
Westminster, CO 80031  
P: 303-658-2108 F: 303-706-3922  
ecodevo@cityofwestminster.us  
[www.westminstereconomicdevelopment.org](http://www.westminstereconomicdevelopment.org)



**WESTMINSTER**  
COLORADO

# REQUIREMENTS & ELIGIBILITY

# SMALL BUSINESS SCHOLARSHIP GRANT APPLICATION

## Business Eligibility

- Must be employed with a business that has 50 or fewer employees
- Must be employed by an existing business (>1 year) and that has an active Westminster business license
- Entrepreneurs who are wishing to start a business may be considered for approval if attending SBDC courses
- Must be in good standing with the Colorado Secretary of State

## Project Criteria

- Selected course must support employee training
- Selected course must support business growth
- Selected course must support entrepreneurial training for business planning

For questions, contact the Economic Development Department  
303-658-2108  
ecodevo@cityofwestminster.us

### Section 1

Name of person attending training: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please check affiliation

Westminster small business owner. **Complete sections 2, 3, and 4.**

Employed by a Westminster small business. **Complete sections 2, 3, and 4.**

Westminster entrepreneur interested in starting a business in the city limits. **Complete sections 3 and 4.**

### Section 2

Name of Business: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Owner/Manger's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Business Address: \_\_\_\_\_

Work Number: \_\_\_\_\_ Business License Number: \_\_\_\_\_

### Section 3

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

Provide a brief description of the course (attach course description): \_\_\_\_\_

School/Institution providing the training: \_\_\_\_\_

How will this course assist you and/or your business? \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Cost of Course: \_\_\_\_\_ Cost of Materials: \_\_\_\_\_

### Section 4

I understand that reimbursement for tuition is contingent upon approval from the City of Westminster prior to the start of class. Documentation of satisfactory course completion and paid tuition receipts must be presented to the City of Westminster prior to reimbursement. For businesses participation in the program, reimbursement will be made directly to the businesses and not to individual owners, managers, or employees. Students taking classes as part of a degree program are not eligible for reimbursement.

Signature of Business Owner/Manager approving course: \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Application Approved: Y N Approval Date: \_\_\_\_\_

Amount Approved: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_ Project Verified: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_