



KACCGA BUSINESS GRANT COMPETITION

Submission Deadline:

Instructions: Please complete all sections of this application form accurately. Submit the completed form along with the required supporting documentation to the Administrator. Incomplete applications may delay processing or lead to disqualification.

Section 1: Business Information

Legal Business Name	
Owner Name	
Business Type	☐ Restaurant ☐ Retail ☐ Manufacturing ☐ Education ☐ Professional Service ☐ Construction ☐ Technology ☐ Other: _____
Business Structure	☐ Sole Proprietorship ☐ LLC ☐ C-Corp ☐ S-Corp ☐ Partnership ☐ Non-Profit
Federal EIN / Tax ID	
Primary Business Address	
Business Phone Number	
Business Email Address	
Company Website / Social Links	
Established Date	
Number of Employees	

Section 2: Applicant & Principal Owner Information

Please provide details for primary owners holding 20% or more equity.

Primary Applicant (Principal 1)

Full Legal Name: _____

Title / Position: _____

Ownership Percentage (%): _____ %

Residential Address: _____

City, State, Zip Code: _____

Phone Number: _____



Email Address: _____

Date of Birth: _____

Secondary Owner (Principal 2 - if applicable)

Full Legal Name: _____

Title / Position: _____

Ownership Percentage (%): _____ %

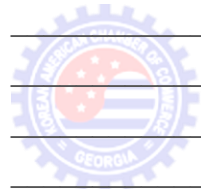
Phone Number: _____

Email Address: _____

Section 3: Executive Summary

Tell us about your business

Please describe your business, the products or services you provide, your target market, and what makes your business unique.



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Current Business Stage

- ☐ Idea / Concept Stage
- ☐ Product Development / Pre-Revenue
- ☐ Operational & Generating Revenue (< 1 Year)
- ☐ Operational (> 1 Year)

Section 4: Funding Request Details

Intended Use of Funds

Describe how the funds will be allocated across your business activities.

How will this grant help your business?

Section 5: Community Impact

How will receiving this grant help your business and benefit the Korean American business community in Georgia?



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Section 6: Certifications & Authorization

By signing below, the applicant certifies that:

1. All information provided in this application and supporting documentation is true, correct, and complete to the best of their knowledge.
2. The funds requested will be used strictly for business purposes as outlined in Section 3.
3. The applicant authorizes the KACCGA Business Grant to verify any provided information and perform necessary credit or background checks as permitted by law.
4. All applicants agree to participate in all KACCGA promotional events upon request.
5. Winner of this contest is required to join KACCGA membership for a minimum of 1 year.

Primary Applicant Signature: _____

Printed Name: _____

Title: _____ **Date:** _____