

Sample Application Questions

This example serves to show business the type of questions that will be on the official grant application. Businesses should be prepared with all of the information needed to answer the below questions.

THIS IS NOT THE REAL APPLICATION. THE REAL APPLICATION WILL BE ON THE COIC WEBSITE WHEN THE APPLICATION PERIOD IS OPEN.

Below are example questions that **MAY** appear on the application. Not all questions here will be on the applications and other questions that are not listed below may be present in the real application.

Contact information for questions are beneath the sample application questions.

1. Please enter your name (first name last name).
2. Please enter the legal name of your business or nonprofit organization.
3. Please enter your email address .
4. Please enter a telephone number where you or the business may be reached.
5. Please upload you W-9 . Make sure that it is filled out completely.
6. Please provide information about your affiliation with the business or nonprofit.
7. Please enter the address for the location of your business or nonprofit in Deschutes County . Please include your street address, city, state, and zip code.
8. Is your mailing address different than the previous address you entered?
9. Is the business or nonprofit headquartered in Oregon and does it have its principal place of operations in Oregon?
10. Is the business headquartered in Deschutes County, Oregon ?
11. Does your business have its principal operations in Deschutes County?
12. What is your business type ?
13. Has your business registered with the Oregon Secretary of State?

14.What is your business registry number?
15.When was your business or nonprofit started ?
16. Is your business CURRENT on federal, state, or local taxes that were due on or before the date of this application?
17.To your knowledge, is your business in compliance with all federal, state, and local laws and regulations ?
18.What is the primary cause of your business' revenue decline in the last nine months?
19.Is your business closed ?
20.What was the impact on your business for the extreme risk period from April 30, 2021 to May 6, 2021?
21. What was your business' gross income for the seven days prior to April 30th, 2021 ?
22.What was your gross income for the seven days from April 30th, 2021 to May 6, 2021 .
23.What was your gross income for the seven days after May 6, 2021 .
24. Did you incur necessary business expenditures due to the recent closure between April 30, 2021 and May 6, 2021?
25.What goods or services do you provide through your business or nonprofit organization?
26. Indicate whether your business falls into one of the following types
27.Please indicate if your business was prohibited from operation as directed by recent Executive Orders 20-12 and/or Executive Order 20-65 or the Public Health Framework .
28. Please enter your Annual Gross Revenues for 2019
29.Please enter your Annual Gross Revenues for 2020
30.How many full-time employees did you have prior to March 15, 2020?
31.How many full-time employees do you currently have now ?

32. How many part-time employees do you currently have now ?
33. What is the total number of full-time AND part-time employees that you have now?
34. What is your race ?
35. What is your ethnicity ?
36. Please describe your ancestry or national origin (example: Russian, Vietnamese, Somali, German, Hmong, Mexican, etc.)
37. What is your gender ?
38. Are you a person with a disability ?
39. Have you ever served in the U.S. Armed Forces, Reserves, or National Guard
40. Are you a member of a federally recognized tribe ?

If you have any questions about what is going to be included information in the real application, please contact COIC staff through the means below.

Email

grants@COIC.org

Phone

541-699-8681