

Appendix: CanGrow Farmer Training Grant Application Guide

Applicants will use a web-based application: <https://mn.gov/ocm/cangrow-training-application/>

The online application will collect information in two ways:

- CanGrow Farmer Training Grant Online Application: Web-based entry of basic unscored information about your project (*all applicants*)
- Upload of relevant documents, including:
 - Form A: Project Narrative, Workplan, and Certifications (*all applicants*)
 - Letters of support
 - Work products
 - Organizational chart and list of board members
 - [Form B: Budget](#) (*all applicants*)
 - [Form C: Affidavit of Non-Collusion](#) (*all applicants*)
 - [Form D: Certification of No Disqualifying Convictions](#) (*all applicants*)
 - Organization chart or list of principals
 - [Form E: Nonprofit Grantee Documents as Applicable](#) (*nonprofit applicants only*)
 - [Form F: For-Profit Required Documents, Lien Disclosure, and Certification](#) (*for-profit applicants only*)
 - [Form G: Capacity Responses](#) (*all applicants*)
 - [Form H: Certification that the entity is not suspended or debarred by the State of Minnesota or federal government](#) (*all applicants*)

The web-based application does not need to be completed in one sitting but is tied to a singular email. We encourage preparing web-based answers and exhibits in advance in case of technological difficulties.

CanGrow Farmer Training Grant Online Application: Web-based questions

Data privacy acknowledgement (unscored - to be completed online)

This data privacy acknowledgement must be completed by an authorized representative; an authorized representative is a designated person at your organization authorized to sign contracts on behalf of the organization.

Tennessee Warning Notice

The Office of Cannabis Management (OCM) collects private or confidential data on individuals for the administration of grants as authorized or required by law. The data is used to fulfill the state's legal obligation to evaluate grant applications and manage awarded grants.

You are not legally required to provide this information and may refuse to do so. However, if you choose not to provide the requested data, your grant application may not be processed, and any awarded grant may be terminated. If you choose to provide the data, it will be used for the purposes described above.

At the time of collection, the data you provide is classified as private or confidential and will only be accessible to OCM staff responsible for evaluating and administering grants. OCM may also be required to release private data by court order or to the Office of the Legislative Auditor.

Under Minnesota Statutes, section 13.599, the following data will become public: the names and addresses of grant applicants and the amount requested once proposals are opened. All other data in proposal responses (except trade secret data as defined in Minnesota Statutes, section 13.37) and data created or maintained by OCM as part of the evaluation process will become public after the evaluation process is complete. **For the purposes of this grant, data is considered public once all grant contracts have been fully executed.**

I have read the above statements and I agree to supply the information requested to the Office of Cannabis Management with full knowledge of the information provided herein. I certify that all information provided herein is true and accurate and that the official signing this form has authorization to do so.

[Electronic Signature of Authorized Representative]*

Contact and eligibility information (unscored)

Required responses are marked by an asterisk (*).

Applicant information

Organization name:*

Organization physical address:*

Organization mailing address:*

Organization website:*

Organization type:*

- Community group
- Educational institution
- Federally recognized Tribe
- Nonprofit organization
- Partnership between different types of organizations listed here (please note that sub-awards are not allowed with this grant)
- Private business
- Unit of local government

Grant point of contact

Point of contact name:*

Point of contact title:*

Point of contact email:*

Point of contact phone number:*

Authorized representative

If awarded a grant, is the person authorized to sign contracts on behalf of the organization the same point of contact person listed above?*

- Yes
- No

If no, please provide the following authorized representative information for signing any resulting contract agreement:

Authorized representative name:

Authorized representative title:

Authorized representative email:

Authorized representative phone number:

Eligibility

Federal tax ID number:*

Minnesota tax ID number:*

SWIFT profile ID number - Optional (if not currently enrolled and if awarded, all grant recipients will need to create profile):

Is your organization registered and in good standing with the Minnesota secretary of state?*

- Yes
- No

Attestations

Confirm that the following statements apply to you and/or your business/organization:

My business/organization is compliant with current state regulations. – (check for yes)*

I/We do not owe the State of Minnesota any back taxes and have not defaulted on any State of Minnesota-backed financing in the last seven years. – (check for yes)*

No one involved in the project or application for the grant is an employee of the Minnesota Office of Cannabis Management (OCM). – (check for yes)*

No one involved in the project or application for the grant is a spouse of an employee of the Minnesota Office of Cannabis Management (OCM).*

- Yes
- No

If no, include the name of the employee. That employee will not be allowed to review the grant, and if the grant is awarded, that employee will have to sign a nondisclosure.

Name:

Project summary (unscored)

Proposal title:*

Project description (250 characters, including spaces):*

- Provide a concise description of the proposed activities. Outline your objectives, how you plan to use the grants funds, and why this is a benefit to the target population. This proposal overview must be suitable for dissemination to the public.

Grant funds requested (minimum \$10,000, maximum \$100,000):*

Total matching funds (cash):*

Total matching funds (in-kind):*

Expected project start date (no earlier than Oct. 1, 2026):*

- Project may begin after award contract is signed, which is estimated to be Sept. 30, 2026.

Expected project end date (no later than Sept. 30, 2027):*

- All items and services must be received and paid for by the end date of the contract, which will be no later than Sept. 30, 2027.
- You will have up to 90 days after your contract end date to submit for a reimbursement.

Organization's Minnesota House District (<https://www.gis.lcc.mn.gov/iMaps/districts/>):

Organization's Minnesota Senate District (<https://www.gis.lcc.mn.gov/iMaps/districts/>):

Please select the location(s) where the proposed work will take place (locations must be in the state of Minnesota) and/or the geographic area(s) served -

<https://apps.deed.state.mn.us/assets/lmi/areamap/plan.shtml><https://apps.deed.state.mn.us/assets/lmi/areamap/plan.shtml#plsw> (select all that apply):*

- Check All (Statewide)
- Seven (7) county metro (Ramsey, Hennepin, Dakota, Anoka, Washington, Scott, Carver)
- Northeast
- Northwest
- Central
- Southwest
- Southeast
- Online/virtual

Describe geographic area served*

Upload A: CanGrow Farmer Training Grant Project Narrative

Complete all responses to the following questions in one document and upload as a PDF or Word document.

- Organization capacity and relevant experience (up to 30 points)
 1. Describe your organization's mission, vision, and values and current services being provided. Explain how they align with the goals of CanGrow.
 2. Describe your organization's history and capability to manage the proposed project based on grant management experience, staff qualifications, organizational experience, and project execution capacity. Include information about how your uploaded samples of work and relevant experience are relevant.

3. Explain how the organization's industry knowledge in cannabis regulation, law, tax law, accounting, and small business management aligns with the grant's objectives.
4. Provide a history of the organization's experience in relevant services such as small business technical assistance, legal consultation, accounting, resource development, and educational instruction.
5. Detail the organization's experience engaging farmers, particularly those facing barriers to education and employment.
6. Explain how lived experiences of the organization's staff align with those of farmers, SEA eligible communities, and/or individuals facing barriers to education and employment.

Project description (up to 20 points)

1. Provide a narrative overview of your project, including how the project promotes navigating the regulatory structure of the legal cannabis industry. This should align with the objectives, activities, and outcomes detailed in the workplan.
2. Describe how the project helps farmers navigate the regulatory structure of the cannabis industry and key activities for compliance.
3. Explain how you will assess program participants' readiness and progress along the Continuum of Readiness (refer to OCM Continuum of Readiness).
4. Explain how the project addresses historic and ongoing equity issues in the cannabis industry.
5. Describe the key roles of core team members and their qualifications. If any roles are unfilled, describe plans to fill and oversee each aspect of the project.
6. Describe how educational programming will be structured to meet farmers' needs.
7. Describe how outreach and marketing to engage farmers will be handled.
8. Is there a physical space available for farmers to gather and host educational activities? If yes, is it suitable for the project? If no, how will space be provided?

Project workplan (up to 20 points)

The work plan describes the day-to-day activities of a project and will be used as a roadmap throughout the life of the grant and as the basis for quarterly project reporting.

1. Provide a narrative description of your workplan.
2. Who will be the point of contact for program participants?
3. Who will be providing and/or developing direct services?
4. Who will provide coordination for meetings, marketing, outreach, and engagement?
5. Who will collect data, track progress, and report on project data and outcomes?
6. Complete the workplan tables below. The work plan describes the day-to-day activities of a project and will be used as a roadmap throughout the life of the grant and as the basis for quarterly project reporting. *You may copy the tables below to enter **up to five goals/outcomes** and related activities.*

Goal:	
Outcome(s) desired:	

Activities: How will you achieve this goal?	Frequency of activities and outputs	Start date of activity	End date of activity	Key staff and partners (use titles)

If successful, what will you achieve?	
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- Diverse outreach, community engagement and community partnerships (up to 10 points)
 1. Describe how your organization will recruit farmers interested in entering the cannabis industry.
 2. Describe what actions will be taken to engage farmers living in SEA eligible communities and/or those facing barriers to education and employment.
 3. Describe how program staff will possess the expertise and cultural competency required to effectively engage farmers.
 4. Describe what steps will be taken to provide language/translation services, intercultural training, or assessment tools.
 5. Describe what collaboration with community partners will be utilized to ensure cultural competency, e.g. letters of support stating specific commitments to the project.
- Performance, evaluation and reporting (up to 10 points)
 1. Describe what data your organization will collect and report to OCM each quarter on the outputs and outcomes of the grant program. At a minimum, data required to be reported by grantees includes:
 - The number of individuals served
 - The number of individual service hours provided
 - Types/numbers of services provided (materials, consultations, workshops, conferences)
 - The number of businesses assisted
 - Demographic and geographic information
 - The number of licenses obtained by program participants
 - The number of program participants voluntarily electing to not participate in the legal cannabis industry due to increased knowledge
 - Impact on farmers' ability to expand into the legal cannabis industry, e.g. refer to Continuum of Readiness
 2. Describe plans to collect data on the quantity and quality of services provided, as well as the measurable outcomes of those services, will be collected, evaluated, and reported.
 3. How you will determine if your project has enhanced cannabis industry compliance?
 4. How you will assess if a client has advanced on the Continuum of Readiness and what specific criteria or milestones will be used to measure?
 5. If applicable, explain how your project will coordinate the implementation of the performance and evaluation plan across partners to ensure the quality and timeliness of reporting.

Form B: Budget (up to 10 points)

Complete and upload the budget for this proposed project using [the provided template](#) and describe the sources and amounts of any nonstate funds or in-kind contributions that will supplement grant money.*

Your proposed budget will be reviewed based on the following criteria:

- Budget has clearly defined including expenses and realistically aligns with the objectives and scope of your project.
- Each budget item is reasonable and well-justified, ensuring that all costs are necessary and directly tied to project activities.
- Costs are reasonable and justifiable for each element of the project.
- The budget aligns clearly with the goals and scope of the proposed project, demonstrating a strong understanding of project needs and priorities.
- The use of additional nonstate funds or in-kind contributions is effectively leveraged to maximize the project's impact and sustainability.

Budget template in separate Excel document: [Budget Template.xlsx](#)

Organizational chart and board list (scored)

Required upload: Upload your organization chart and, if applicable, board of directors list as a .doc or .pdf. Include tenure of the board of directors and length of employment for key staff involved in grant activities and administration.

Materials will be reviewed along with your responses to the **Project Narrative** sections: **Organization capacity and relevant experience**, **Project workplan**, and **Budget**.

Samples of work (scored)

Optional upload: Up to three relevant work samples and/or evidence of skill/knowledge as a .doc or .pdf. **Note: external links will not be reviewed or considered.**

Materials will be reviewed along with your response to the **Project Narrative** section: **Organization capacity and relevant experience** (scored up to 30 points). Please ensure uploaded materials are relevant and referenced in the narrative.

Examples of work samples and evidence of skill/knowledge include:

- Impact report
- Loan policies or procedure manuals
- Sample loan documentation
- Marketing materials
- Compliance report
- Certification or accreditation
- Portfolio
- Resume/curriculum vitae

Letter(s) of support (scored)

Optional upload: Up to three (3) letters of support from community members, partners, or program participants who can attest to your organization's ability to achieve the proposed project goals.

Letters of support will be reviewed along with your response to the **Project Narrative** section: **Diverse outreach, community engagement and community partnerships** (scored up to 10 points).

Form C: Affidavit of Non-Collusion

Complete, sign, and upload the Affidavit. Please note that this Affidavit must be signed in the presence of a notary public. The secretary of state website maintains a [Find a Notary](#) tool if you are not already connected to one. The original document should be kept on file and available if subject to grantee site monitoring.

Form D: Certification of No Disqualifying Conviction

Complete, sign, and upload the certification. Please note that there are multiple pieces to this certification:

- Certification of no financial felonies by principals – attach organization chart or list of principals
- Certification of no disqualifying convictions by organizational leaders
- Consent to complete a public records check – completed and signed by each organizational leader

Form E: Nonprofit Grantee Documents as Applicable

This is only required for nonprofit applicants.

Complete and upload this document. Note that you will be required to submit additional documentation if selected as a finalist.

Form F: For-Profit Required Documents, Lien Disclosure, and Certification

This is only required for for-profit applicants.

Be prepared to complete and submit this if selected as a finalist. OCM grants staff will request it when needed.

Form G: Capacity responses (unscored)

Complete and upload this document.

Form H: Certification that the entity is not suspended or debarred by the State of Minnesota or federal government (unscored)

Complete and upload this document.

CanGrow Farmer Training Grant Application Checklist

1. Review application materials

- All materials and links for applying can be found on the [CanGrow webpage \(https://mn.gov/ocm/social-equity/grants/cangrow.jsp\)](https://mn.gov/ocm/social-equity/grants/cangrow.jsp)
- Attend online webinars for additional details and online submission process
- Review frequently asked questions

2. Submit a complete application

- Complete [online application questions \(https://mn.gov/ocm/cangrow-training-application/\)](https://mn.gov/ocm/cangrow-training-application/) for the CanGrow farmer training grant
- Upload the following documents (all applicants)
 - Upload A: Project Narrative, Workplan, and Certifications
 - Organizational chart
 - Board list
 - Letters of support (optional)
 - Work samples (optional)
 - [Form B: Budget \(https://mn.gov/ocm/grant-form-b/\)](https://mn.gov/ocm/grant-form-b/)
 - [Form C: Affidavit of Non-Collusion \(https://mn.gov/ocm/grant-form-c/\)](https://mn.gov/ocm/grant-form-c/)
 - [Form D: Certification of No Disqualifying Convictions \(https://mn.gov/ocm/grant-form-d/\)](https://mn.gov/ocm/grant-form-d/)
 - Organization chart or list of principals whom you are certifying
 - Signatures from organizational leaders must be present
 - [Form G: Capacity Responses \(https://mn.gov/ocm/grant-form-g/\)](https://mn.gov/ocm/grant-form-g/)
 - [Form H: Certification that the entity is not suspended or debarred by the State of Minnesota or federal government \(https://mn.gov/ocm/grant-form-h/\)](https://mn.gov/ocm/grant-form-h/)
- Upload the following document (nonprofit applicants)
 - [Form E: Required Nonprofit Grantee Documents as Applicable \(https://mn.gov/ocm/grant-form-e/\)](https://mn.gov/ocm/grant-form-e/)
- Upload the following document (for-profit applicants)
 - [Form F: For-Profit Required Documents, Lien Disclosure, and Certification \(https://mn.gov/ocm/grant-form-f/\)](https://mn.gov/ocm/grant-form-f/)
- Submit completed application along with all necessary attachments