

KANSAS STEP PROGRAM APPLICATION

All financial, information and intellectual property will be kept confidential.

COMPANY INFORMATION

Company Name		FEIN :		NAICS:	
Type (Limited liability, etc.)		Year of Inception		Number of Employees in Kansas	
Company Contact Person					
Address					
Phone		Email		Fax	
Business Description					
Annual Revenue					
Percentage of export sales		Export Destinations			
Current International Distribution Channels					
<ul style="list-style-type: none"> ○ Direct sales to retailers or retail chains ○ Direct sales to end users ○ New to export ○ Sales through specialized importers/wholesalers ○ Sales through one or more distributors 					
Is the company a woman, minority, disabled individual or veteran-owned business?					

STEP ACTIVITY

In which STEP activity are you planning to participate? (Please submit separate application for each desired activity)
<ul style="list-style-type: none"> ○ Kansas Department of Agriculture Trade Missions <ul style="list-style-type: none"> ○ AGRO, Ukraine ○ Foro Mascotas Pet Food International, Mexico ○ Thailand ○ Africa

PRODUCT / SERVICE INFORMATION

Harmonized System Code	
Is your product produced or value added in Kansas?	
Briefly describe the product/service(s) you seek to promote.	

APPLICANT CERTIFICATION

The applicant hereby certifies:

- A. That the Kansas Department of Commerce, the Kansas Department of Agriculture and the STEP Review Committee are hereby authorized to verify in any manner deemed appropriate any and all items in or related to this Application including investigation of judicial records, information available through state or federal departments or agencies including tax clearance records, credit bureau services, and business reporting services.
- B. Applicant is aware that the Kansas Department of Commerce and the Kansas Department of Agriculture must comply with certain State requirements which may impact proposed projects. Funded projects must comply with all State laws and regulations.
- C. To the best of Applicant’s knowledge and belief, the information contained in this Application summary is true and correct and the governing body of the Applicant has duly authorized the document.
- D. Applicant must be willing to:
 - a. contribute at least \$1,000 towards their expenses
 - b. talk to the media, if requested

Signature of Authorized Official

Printed Name of Authorized Official

Title

Date

6. Attachments/Checklist

The following attachments must be included with this Application:

- SBA Self-Representation as an ‘Eligible Small Business Concern’ Form
- SBA Form 1624 ‘Certification Regarding Debarment’ Form
- Kansas STEP Grant Export Readiness Questionnaire Form

Please note that at the discretion of the STEP Review Committee, additional documentation may be required before the Application is deemed complete.

INSTRUCTIONS:

Please sign, date and return the application, along with the above attachments, to the address listed below:

**Suzanne Ryan-Numrich
Kansas Department of Agriculture
1320 Research Park Drive
Manhattan, KS 66502
(785) 564-6704
suzanne.numrich@ks.gov**