Jomen mpowering

SUBMIT ALL QUESTIONS VIA rootstoriseaward@gmail.com

ROOTS TO RISE AWARD

Purpose:

The Roots to Rise Award aims to provide financial support and mentorship to woman-owned small businesses located along the Gulf Coast of Mississippi. This award is designed to empower female entrepreneurs by offering both financial resources and guidance to help them grow and sustain their businesses, addressing the unique challenges faced by early-stage businesses.

Eligibility Criteria:

- Ownership: Must be a woman-owned business.
- Location: Business must be based in the Coastal counties of Mississippi. Harrison, Hancock, Stone, or Jackson Counties
- Age of Business: Businesses must have been registered at least 18 months prior to November 1,2024.
- Business Type: All types of small businesses are eligible, including but not limited to retail, services, hospitality, and creative ventures.
- Commitment to Community: Applicants should demonstrate commitment to the local community through initiatives, partnerships, or involvement.

Award Details:

- Recipients will receive up to \$500 in financial support and business coaching and mentorship valued at \$7500 from Coach M, M.E.R. Solutions and 29.11 Brittany Bea Services.
- Additionally, recipients will be paired with an experienced mentor who will provide guidance on business development, financial management, and growth strategies to help navigate the crucial early stages of their entrepreneurial journey.

Application Requirements:

- Completed Application Form: All sections must be filled out completely.
- Proof of Business: Documentation confirming the business is in coastal Mississippi and registered with the state of Mississippi (e.g., business registration documents, articles of incorporation).
- Business Description: A brief description of the business and its mission (100 word max).
- Personal Statement: A short narrative (200 word max) on the applicant's journey as an entrepreneur and the impact of this award on their business.





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Application Process:

- Submission: Applications must be submitted electronically to Award Committee via rootstoriseaward@gmail.com by midnight on March 1st, 2025
- Deadline: Applications must be received by March 1st, 2025.
- Review Process: A selection committee will review applications based on eligibility, completeness, and potential impact.

Award Notification:

- Selected recipients will be notified April 26th, 2025.
- The award will be presented at Brunch 30, and recipients must be present to win.

Use of Funds:

Funds can be used for various business expenses, including but not limited to:

- Inventory purchase
- Marketing and advertising
- Equipment and supplies
- Rent or utilities
- Employee wages

Reporting Requirements:

- Award recipients must provide a final report detailing how the funds were utilized, including any impact metrics (e.g., increased revenue, job creation) within six months of receiving the award.
- Report must be emailed to Award Committee via rootstoriseaward@gmail.com by midnight on November 30, 2025





Applicant Information:

| Name: | |
|-------------------|--|
| Business Name: | |
| Business Address: | |
| City/State/Zip: | |
| Phone Number: | |
| Email Address: | |

Business Information:

| Date Established: _ | | | |
|---------------------|--------------|-------------------------|--------------|
| Type of Business: _ | 5 11 | | |
| Business Descripti | on (100 word | l max): <i>Please A</i> | <u>ttach</u> |

Eligibility Confirmation:

| I confirm that I am a woman-owned business. \Box |
|--|
| My business is in coastal Mississippi. 🗆 |
| My business is at least 18 months old. 🗌 |

Funding Request:

Amount Requested: \$ _____ (up to \$500) Purpose of Award Funds (200 word max): Please Attach

Attachments:

Completed Application Form Business Description (100 word max) Purpose of Award Funds (200 word max) Proof of Business Registration with the State of Mississippi

Signature:

I hereby certify that the information provided in this application is true and complete to the best of my knowledge.

Signature: _____ Date: _____