



Hillsborough County Economic Development Innovation Initiative Application *Events and Industry Promotion Initiatives*

FOR COUNTY USE ONLY:

DATE RECEIVED: _____

AMOUNT REQUESTED \$ _____

FORWARD INFORMATION TO GRANT REVIEW COMMITTEE:

DATE: _____ INITIAL: _____

OUTCOME: _____

DATE: _____ INITIAL: _____

READ THIS FIRST

Deadline: The application submitted must be complete and received by **3:00 P.M.** local time on **October 31, 2014**. Applications received after the submission deadline will not be considered. Please attach narrative responses with corresponding question numbers.

Note: In accordance with the policy ED-14 governing the EDI2 Program, adopted by the BOCC on June 5, 2013, all applicants that receive funding are required to provide metrics, a performance evaluation and a final budget evaluation following the project based on the information provided by the applicant in the application prior to funding. All applicants should read the EDI2 Policy and Guidelines and schedule a pre-application meeting prior to completely submitting this application. To schedule a pre-application meeting, contact Jennifer Whelihan at whelihanj@hillsboroughcounty.org or (813) 272-6217.

Note: When evaluating applications, the Advisory Committee will make recommendations based on the following County policies in addition to the review criteria listed in the policy document: 1) County does not fund food or drink; 2) County does not fund lodging for event participants; 3) County does not count "in-kind" services toward budget total; 4) In order to demonstrate proper leverage of public sector funding, County money will not exceed 50% of the total budget; 5) If an event is held multiple times throughout the year, only approve the occurrences of event held before the next funding cycle. (To avoid pre-approving a reoccurring event that might prove to be non-performing.) Also, no entity currently funded by the BOCC for Economic Development oriented programs will be considered in the EDI2 program. A full list of EDI2 funding guidelines is available on the website, along with the BOCC approved policy document.

PART A – INTRODUCTION

1. **APPLICANT ORGANIZATION:** Eureka Factory

CONTACT PERSON: Theresa Willingham TITLE: Partner

ADDRESS: 5910 Hammock Woods Drive Odessa, FL 33556

DAYTIME PHONE: 813-792-7411 FAX: _____ EMAIL: Terri@WillinghamLLC.com

2. **EVENT OR INDUSTRY PROMOTION NAME:** Hack Tampa Bay

3. **EVENT OR INDUSTRY PROMOTION DATE(S):** Tentative - June 5 & 6, 2015

4. **LOCATION/ADDRESS** (if applicable): The Hive, John F. Germany Library 900 N. Ashley Drive, Tampa

☐ UNINCORPORATED COUNTY ☐ CITY OF PLANT CITY ☒ CITY OF TAMPA ☐ CITY OF TEMPLE TERRACE

5. **NUMBER OF EXPECTED ATTENDEES IF EVENT, OR NUMBER OF TARGETS, IF INDUSTRY PROMOTION:**

20-50

6. **EXPECTED ATTENDEE OR TARGET PROFILE (ENTREPRENEUR, EXECUTIVE, STUDENT, ETC.)**

Coders, students, tech and business leaders

7. **EXPECTED TOTAL COST OF EVENT OR INDUSTRY PROMOTION (please provide a breakdown of the event by major category expense – attach if necessary):** \$2000

8. **GRANT AMOUNT REQUESTED (\$25,000 maximum):** \$1000

9. **GEOGRAPHIC REACH OF IMPACT (for example – national conference, regional meeting, etc.):**

INTERNATIONAL ☐ NATIONAL ☐ STATEWIDE ☐ LOCAL (TAMPA BAY) ☒



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10. IF THIS IS AN EVENT, IS THIS A RECURRING EVENT? Yes

IF YES:

10a. HOW OFTEN DOES THE EVENT OCCUR? Annually

10b. WHEN WAS THE INITIAL EVENT? Our first time hosting, but National Day of Civic Hacking is an annual event

10c. DO YOU PLAN TO CONTINUE THE EVENT IN THE FUTURE? Yes

11. PROJECT TYPE: (check all that apply)

☒ 1. Event

- ☐ Major Kick-Off Event
- ☐ Recurring Conversation about the Technology Community
- ☐ Technology Showcase Event
- ☒ Hack-A-Thon/App-A-Thon
- ☐ Technology Boot Camp
- ☒ Software and Application Development Event
- ☐ Business Formation Event
- ☐ Other (specify): _____

☐ 2. Industry Promotion

- ☐ Collaborative Effort to Market Existing Technology Talent, Successes and Resources
- ☐ Other (specify): _____

FOR THE FOLLOWING QUESTIONS, PLEASE ATTACH NARRATIVE RESPONSES TO APPLICATION

12. BRIEFLY DESCRIBE THE EVENT OR INDUSTRY PROMOTION (PLEASE LIMIT RESPONSE TO TWO PARAGRAPHS).

PART B – REVIEW CRITERIA

DESCRIBE HOW THE EVENT/PROMOTION MEETS AND/OR EXCEEDS EACH OF THE APPLICABLE REVIEW CRITERIA AS THEY APPLY. EACH REVIEW CRITERIA MUST BE ADDRESSED BELOW. (PLEASE LIMIT EACH RESPONSE TO ONE PARAGRAPH)

1. DESCRIPTION: HOW THE EVENT/INDUSTRY PROMOTION DRIVES THE GROWTH OF TECHNOLOGY AND INNOVATION START-UPS AND SMALL BUSINESSES IN HILLSBOROUGH COUNTY.

2. LEVERAGING: DESCRIBE HOW THE PROJECT (i) LEVERAGES PRIVATE SECTOR DOLLARS IN TERMS OF FINANCING, EXPERTISE AND NETWORKING; and (ii) DEMONSTRATES A COLLABORATIVE AND SYNERGISTIC APPROACH

3. PERFORMANCE EVALUATION/METRICS. PROVIDE APPROPRIATE CRITERIA AND MILESTONES FOR DETERMINING/ MEASURING THE SUCCESS OF THE EVENT/PROMOTION. DEFINE RELEVANT OUTCOME INDICATORS AND TARGETS DURING AND AFTER THE EVENT/PROMOTION (SUCH NUMBER OF EVENT ATTENDEES, ATTENDEE PROFILES, MEDIA COVERAGE, GROWTH IN PARTICIPATION OVER PREVIOUS YEARS, HOTEL NIGHTS, NEW START-UPS FORMED)

4. ECONOMIC DEVELOPMENT IMPACT: DESCRIBE HOW THE EVENT/INDUSTRY PROMOTION DEMONSTRATES A WELL-THOUGHT OUT IDEA AND MODEL THAT HAS THE POTENTIAL TO BE SUSTAINABLE AND GENERATE ECONOMIC DEVELOPMENT; CREATES PERMANENT LOCAL JOBS AND POTENTIAL FOR SUSTAINED ECONOMIC IMPACT AND GROWTH; GENERATES LOCAL BUSINESS; ADDS VALUE TO THE LOCAL ECONOMY.



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5. QUALITY OF TEAM: DESCRIBE THE QUALIFICATIONS, TRACK RECORD, AND ABILITY OF THE APPLICANT AND PROFESSIONALS COMPOSING THE EVENT/PROMOTION TEAM TO SUCCESSFULLY EXECUTE THE EVENT/PROMOTION.

PART C – ATTACHMENTS

FOR EVENTS, ATTACH COLLATERAL/PROMOTIONAL MATERIAL, EVENT AGENDA. FOR INDUSTRY PROMOTION ATTACH ANY RELEVANT INFORMATION TO FURTHER DESCRIBE AND REPRESENT THE PROJECT.

APPLICANT CERTIFICATION

I agree to comply with all requirements of the Hillsborough County Economic Development Innovation Initiative, that any funds received as a result of the application will be used only for purposes set forth herein, that I am authorized to submit this application on behalf of my organization, and that the statements herein are true, complete and accurate to the best of my knowledge. I also certify that I have read and understand the EDI2 program policy and guidelines. I acknowledge that staff strongly encourages applicants to have a pre-application meeting.

10/29/2014

Signed Name

Date

Theresa Willingham

Printed Name