**SMALL BUSINESS INSTITUTE® BUSINESS APPLICATION**

BUSINESS NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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TELEPHONE (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BUSINESS HOURS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAX (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WEBSITE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF INQUIRER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION/TITLE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF BUSINESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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MAJOR PRODUCTS OR SERVICES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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LENGTH OF TIME IN THIS BUSINESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF YOU ARE ACCEPTED AS A CLIENT WILL YOU BE WILLING TO:

A. MEET WITH THE STUDENT TEAM AT LEAST 6 TIMES DURING A SEMESTER TO DISCUSS THE PROJECT IN A FREE AND OPEN MANNER?

 Yes No

B. PROVIDE RECENT BALANCE SHEETS AND INCOME STATEMENTS IF THEY RELATE TO THE PROJECT?

 Yes No

HOW DID YOU FIND OUT ABOUT THE SBI PROGRAM?

SBA SBI Promotion CHAMBER OF COMMERCE SBDC

PAST SBI PARTICIPANTS ADVISORY BOARD COUNCIL OTHER

PLEASE NOTE THAT ALL INFORMATION GIVEN HERE AND DURING ANY CONSULTING SESSION WILL BE HELD IN STRICT CONFIDENCE.

1. What methods of advertising do you currently use or are you considering using to attract your most likely customers?

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 2. Who are your main competitors? How do they advertise or attract customers? What prices do they charge? (try to discuss at least 2 competitors)

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 3. What are your competitive advantages? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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4. What are your competitive weaknesses? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5. To what trade associations do you belong? If none, what are the primary trade associations serving your industry?

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6. What publications, trade journals, or other sources of information do you receive related to your business?

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7. What are the specific areas for which you desire consulting assistance?

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|  |  |  |  |
| --- | --- | --- | --- |
| 8. Current number of employees | FT \_\_\_\_\_\_\_\_\_ | PT \_\_\_\_\_\_\_\_\_ |  1099 \_\_\_\_\_\_\_\_\_ |

|  |  |  |  |
| --- | --- | --- | --- |
|  | YTD | 2015 | 2014 |
|  |  |  |  |
| 9. Annual revenue  | \_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ |
|  |  |  |  |
| 10. Annual net profit  | \_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ |

Check which financial statements you currently have and will provide to the consultant at the start of the semester.

11. Income (profit and loss) quarterly\_\_\_\_\_ annually\_\_\_\_\_\_

12. Cash Flow quarterly\_\_\_\_\_ annually\_\_\_\_\_\_

13. Balance Sheet quarterly\_\_\_\_\_ annually\_\_\_\_\_\_

15. Do you hold any patents or copyrights? Do you have any contractual arrangements with supplies or customers? If yes, please describe.

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A nonrefundable, administrative fee of $300 (for companies with sales of $500K-$999K), $500 (for sales of $1M- 4.999M), or $750 (sales of $5M and over) will be due upon acceptance to the program. Please make checks payable to the Small Business Development Center at UCF.

Please use the contact information below for any questions. Kindly return application by mail, fax or email to:

Jill Kaufman, Assistant Director

Florida SBDC at UCF

3201 E. Colonial Drive, Suite A-20

Orlando, FL 32803

407-420-4850 / FAX 407-420-4862

Jill.Kaufman@ucf.edu

**Client Agreement Form**

Company Responsibilities

1. Being available to the student SBI team at the times the client company and student team mutually agreed upon. Depending on student work schedules it may be necessary to schedule meetings after hours or on the weekend.
2. It is required that the student team meets with the client company at least 6 times during the semester.
3. Maintain weekly communication, if needed, with the student SBI team.
4. Making available to the student SBI team those records, files, and financial statements that the team and the client company agree are necessary to complete their project.
5. Using the student SBI team in their proper capacity as "consultants" and not expecting the students to serve as interns or temporary help to do work that would normally be performed by regular employees.
6. Signing a "Client Acknowledgment" of the final report at the completion of the project.
7. Expecting some follow-up research and surveys to determine the quality and effectiveness of the SBI program.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read this agreement and accept its terms.

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Client Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name