Sample Application For Enrollment In Mentor Protégé-Program

Sample Application
If your business concern has been in operation for three years or longer, please provide the annual gross receipts for the last three fiscal years for this business concern and its subsidiaries and affiliates:

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Annual Gross Revenue</th>
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<tbody>
<tr>
<td>19__</td>
<td>$____________________</td>
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Check the Categories Where you Need Assistance:

- Business Plan
- Implementation and action plans
- Organization structure
- Market Analysis
- Operations assessment
- Blueprint reading
- Reading & interpreting plans & specifications
- Scheduling & purchasing
- Construction equipment & materials
- Obtaining permits & subcontracts
- Preparing & negotiating change orders, job budgets, trade payment breakdowns
- Prompt payment procedures
- Records & contract management
- Troubleshooting and avoidance delay
- Personnel Management
- Project planning & scheduling
- Accounting records preparation & maintenance
- Cost Accounting
- Bonding & insurance
- Banking services
- Job cost & work in progress
- Payrolls (federal, state fringe benefits)
- Competitive marketplace overhead
- Analysis of major fixed & variable cost components
- Post award bid assessment of successful & unsuccessful bidders
- Take-offs
State Why You Want to Participate in the Mentor Program
(Attach additional sheet(s) if necessary).
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Business starting date: ______________________________
Number of full-time employees: _______________________
Number of current part-time employees: _______________
Specialty: ___________________________________________
______________________________________________________
______________________________________________________
______________________________________________________

Legal Structure of Business:
Corporation ________________________________________
Partnership ________________________________________
Sole Proprietorship ________________________________
Other (Specify) ____________________________________

Name of Insurance Company ___________________________
Agent _______________ Phone Number ___________________
$ Amount ____________ Type of Coverage ______________

Bonding Company ____________________________________
Agent _______________ Phone Number ___________________
$ Single ____________ $ Aggregate ____________________
Please list major customers or projects of the business for the last two years (list most recent first). If new business, list previous business references:

<table>
<thead>
<tr>
<th>Customer</th>
<th>Telephone</th>
<th>Contact</th>
<th>Type of Contract / Year</th>
<th>* Person</th>
<th>Project</th>
<th>Amount</th>
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* Indicate whether you were (P) Prime Contractor; (JV) Joint Venture; (SUB) Subcontractor