

Site:

Registration Date:

Marketing for Smarties Challenge

Application Form

Name:		Work Phone:	
Name of your Business:		Home Phone:	
Title:		Fax Number:	
		E-Mail Address:	
Business Address:	City:	State:	Zip:
Home Address:	City:	State:	Zip:

Section I. Personal Profile

Please check the response that best applies to your situation. All information will be kept confidential.

1. Gender 1. Male 2. Female

2. What is your age? _____ years old

3. What is your ethnic background?

1. African American 3. Hispanic 5. Caucasian
 2. Asian American 4. Native American 6. Other (Specify): _____

4. Which category best describes your formal years of education? (Check one.)

1. Elementary/secondary school 4. Vocational/trade school graduate 7. A 4-year college graduate
 2. High school graduate 5. Some college 8. Post graduate college
 3. Some vocational/trade school 6. A 2-year college graduate

5. Are you the primary income earner in your household? 1. Yes 2. No

6. What was your gross annual income last year from all sources? Annual Income: \$_____.00

7. What is your present occupation? _____

8. Have you previously owned/operated a business? 1. Yes 2. No

Section II. Information About Your Business

1. What is the main activity of your business? (Check one.)

1. Ag services 5. Catering-food service 9. Health Services 13. Restaurant/Bar 17. Wholesale/distribution
 2. Ag production 6. Construction 10. Manufacturing 14. Retail/Merchandising 18. Other (specify):
 3. Arts/crafts 7. Consumer Services 11. Mechanical Repair 15. Transportation
 4. Assembly 8. Financial Services 12. Professional Services 16. Value-added processing (food products)

Section II. Information about your business (continued)

2. Are you the primary owner/operator of your business?

1. Primary Owner 2. Jointly Owned

3. What is the current form of ownership of your business? (Check one.)

1. Limited Liability Company 3. General Partnership 5. C-Corporation
 2. Sole Proprietorship 4. Limited Partnership 6. S-Corporation

4. How long have you been operating/managing this business? _____years

5. How would you best describe the status of your business today? (Check one.)

1. Idea for a potential business 4. Existing business (more than 2 yrs. old)
 2. Start-up business (less than 2 yrs. old) 5. Expanding the business (more than 2 yrs. old)
 3. Part-time business

6. Including yourself, how many people does your business presently employ?

1. # of part-time employees: _____employees 2. # of full-time employees: _____employees

7. What was your gross sales revenue for last year? Gross sales: \$_____.00

8. How did you become connected with your business? (Check one.)

1. I started it 5. I joined my family in operating it
 2. I am expanding a part-time business 6. I purchased a franchise
 3. I purchased it 7. Other (Specify.): _____
 4. I do not own, but I am the manager

Section III. Your Class Expectations

1. How did you learn about the Marketing for Smarties Challenge? (Check one.)

1. Word of mouth 5. Chamber of Commerce 9. SBDC
 2. Newspaper Ad 6. SBA 10. Other (Specify.): _____
 3. Radio 7. Information flyer/brochure
 4. Television 8. Local sponsor mailing

2. Please list the top three (3) reasons for enrolling in the courses:

- 1.
- 2.
- 3.

3. Please list your top five (5) learning objectives for this course:

- 1.
- 2.
- 3.
- 4.
- 5.