

BUSINESS OPPORTUNITIES PROGRAM

INSTRUCTIONAL SERIES INTAKE FORM



The Business Opportunities Program (BOP) harnesses the resources of the Rochester Schools Modernization Program (RSMP) to increase the capacity of minority, women, small and disadvantaged businesses (M/W/S/DBEs) through a comprehensive Instructional Series and subsequent Mentor/Protégé Program.

INDIVIDUAL BACKGROUND QUESTIONNAIRE

Name: _____

Gender: Male Female No Answer Age: 18-25 26-40 41-55 Over 55 No Answer

Are you a resident of the City of Rochester: Yes No

Education: High School Diploma GED College Degree _____

Vocational Training: _____ No. of Months/Years: _____

Experience:

Profession/Trade: _____ CV/Resume: Yes No

Licenses (list all): _____

Certifications (list all): _____

Computer Skills:

	Beginner	Intermediate	Advanced		Beginner	Intermediate	Advanced
Microsoft Word				Microsoft Outlook			
Microsoft Excel				Microsoft Project			
Microsoft PowerPoint				Primavera Expedition			



FIRM PROFILE QUESTIONNAIRE

Business Name: _____

Your Title: _____ **Year Business Began:** _____ **Do you work full-time in your business?** Yes No

Business Address: _____

Business Web Site: _____

Business Email: _____ **Business Phone:** _____

Best Contact Method: Phone Email Text

Is your business in your home? Yes No **Is your business located in the city?** Yes No

Business Ownership: Woman Owned Asian Owned Hispanic Owned African American Owned

Native American Owned Other: _____ Prefer Not To Answer

Business Structure: DBA LLC C Corp S Corp Partnership _____ (your % of Partnership)

Sole Proprietor: Yes No

Employees

Trade Staff
Clerical Staff
Accounting Staff
Marketing Staff
Other:

No. of Full Time	No. of Part Time

Annual Gross Revenues: 2014: _____ 2015: _____ 2016: _____

Who are your current customers? Residential Commercial Public Government

Current Major Customer(s): _____

Certification Status: MBE WBE SBE DBE None

How do you currently market your business?

Branding: (please check all that you currently use for your business)

Logo Slogan Business Cards Web Site Facebook Twitter
 LinkedIn Instagram Pinterest Business Plan Capabilities Statement



Previous participation in the Rochester Schools Modernization Program (RSMP)?

Yes No

If yes, please briefly describe your scope of work:

Phase 1 Phase 2

INSTRUCTIONAL SERIES TERMS AND CONDITIONS

The Business Opportunities Program Instructional Series will be held twice weekly and will begin promptly at 5:30pm and end at 8:00pm. There will be two fifteen (15) minute breaks during each presentation and refreshments will be provided. If you are unable to attend a class for any reason, please contact BOP Administration at least 24 hours prior to the presentation using the contact information below. There are a total of 35 sessions and 75% attendance is required to receive a Certificate of Completion. Each presentation will include an evaluation form that must be completed by each participant at the end of the presentation. Active participation in the Instructional Series is a requirement to be a candidate for the Mentor/Protégé Program and the Certificate of Completion is required for participation in the networking events. Pictures and/or video of the Instructional Series/networking events and the participants may be used for promotional purposes.

I understand and agree to the above terms and conditions for participation in the Business Opportunities Program Instructional Series.

Signature: _____

Date: _____

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