## Winter Reimbursement Application

Name Date			
Business or Home Address			
City	State	e Z	(ip
Phone number where CDR can contact you			
Email address where CDR can contact you			
	ELIGIBLE SCC WORKSHOP	<u>S</u>	
Common Sense Marketing for Small Business Common Sense Marketing for Small Business	01/28/20 03/07/20	\$ 56	
TBD  Let us know if you are in need of workshops on C  CDR is willing to consider training from other sou  Community Development Resources (CDR) will re	irces. <u>eimburse</u> expenses for appro		
<ol> <li>Submit an application to CDR at least 1 wee</li> <li>Meet with a CDR staff member to discuss y within 1 day if you are approved.</li> <li>Register for the workshop and purchase an</li> <li>Attend the workshop; have the instructor s</li> <li>Attach the receipts to the attendance form</li> <li>Meet with a CDR Staff member to discuss to</li> <li>CDR will send you a check within 1 week to</li> </ol>	ek prior to the workshop. our business, development of y required books. SAVE THE ign the attendance form. and give/send it to CDR. he workshop, next steps, ass	stage, strengths/weak	nesses. CDR will notify you
By submitting an application, you agree to meet after.	with a CDR staff member at	least twice, once prior	to the workshop, and once
	Signature		 Date

## **BUSINESS INFORMATION**

Name of Business				
Business Stage Pre-startup Start-up (1 year or less) Existing # of yrs				
What is your product/service?				
Is your present/future business home based?  If not home based, is location  Yes  Owned  Leased				
What professional services are you using? (Check all that apply)  Attorney Accountant Advertising/Marketing Bookkeeper Business Coach NBDC Score Other				
Experience related to business?				
Current business issues				
Who is your customer?				
How many people does your business employ?				
What were your gross sales from last year?				
<u>Demographics</u>				
1. Ethnicity Hispanic or Latino Not Hispanic or Latino				
2. Race Native American/Alaskan Black or African American Asian Hawaiian/Pacific Islander Caucasian Other				
3. Are you a veteran?				
4. Do you file as "Head of Household" on your income taxes?   Yes   No				
Number of people in your household?				
5. What was the applicant's household's gross annual income last year from all sources?				
<u>Household Size</u> <u>30% or Less</u> <u>31%-%50%</u> <u>51%-80%</u> <u>More than 80%</u>				
1 Less than \$15,750 \$15,751-\$26,200 \$26,201-\$41,950 \$41,951 or more				
2 Less than \$18,000 \$18,001-\$29,950 \$29,951-\$47,950 \$47,951 or more				
3 Less than \$20,200 \$20,201-\$33,750 \$33,751-\$53,950 \$53,951 or more				
4 Less than \$22,450 \$22,451-\$37,450 \$37,451-\$59,900 \$59,901 or more				
5 Less than \$24,250 \$24,251-\$40,450 \$40,451-\$64,700 \$64,701 or more				
6 Less than \$26,050 \$26,051-\$43,450 \$43,451-\$69,500 \$69,501 or more				
7 Less than \$27,850 \$27,851-\$46,450 \$46,451-\$74,300 \$74,301 or more 8 or more Less than \$29,650 \$29,651-\$49,450 \$49,451-\$79,100 \$79,101 or more				
8 or more Less than \$29,650 \$29,651-\$49,450 \$49,451-\$79,100 \$79,101 or more				
6. Years of Education (Please check one)				
☐ High school graduate ☐ 2-year college graduate				
Some vocational/trade school/college 4-year college graduate				
☐ Vocational/trade school graduate ☐ Post-graduate college				