



**ENTREPRENEURSHIP  
ADVANTAGE, INC.**  
TRAINING, CONSULTING, EMPOWERMENT & BEYOND

## **EA -1000 Small Business Intensive Application**

Application Date: \_\_\_\_\_

Course Start Date: \_\_\_\_\_

Referral Source: Career Center { } \_\_\_\_\_ EA Graduate { } Name \_\_\_\_\_  
Website: { } Other: { }, please specify \_\_\_\_\_

### **Part I: Contact Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### **Part II: Business Concept Information**

1) What type of business will you be launching? Product { }, Service { }.

2) What is your business concept?

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**2) Industry Overview: In what industry will you be competing? What are the major trends impacting your industry? Is the market viable?**

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**3) Experience: What relevant experience do you have to compete in the industry?**

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**4) Target Customers: Who will buy you product or service? Why will they buy it?**

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**5) Competitors: Who are your major competitors and how will you be different?**

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**6) Marketing: How will you reach and attract your target customers?**

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**7) Critical Success Factors: What do you consider is most critical to the success of your business** \_\_\_\_\_

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**8) Challenges: What are the key challenges you think you will face in this class and in starting your business?** \_\_\_\_\_

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**9) Strategic Alliances: Who are the contact you currently have that can help you get clients, provide industry expertise, or in other ways support his venture. Please be specific?** \_\_\_\_\_

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**10) Start-up Capital: How much money do you think you will need to start your business? How do you think you will raise the required funds?**

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### **Part III – Computer Skills Assessment**

**How proficient are you in the following, NOVICE, (limited capability)  
COMPETENT, (can get the work done), EXPERT (can teach others)**

**Internet**

**Microsoft Word**

**Microsoft Excell**

**Microsoft Powerpoint**

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## Part IV – Personal/Situational Viability Assessment

**1) Financial Stability: How will you sustain yourself financially during the program and during the start up phase of the business? Specifically, how many months can you sustain your financial obligations before generating a consistent revenue stream?**

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**2) Personal Support Network: Given that this program is time intensive, who will support your obligations personally while you are in the program and during the start up phase of your business.** \_\_\_\_\_

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## Part V – Candidate Expectations

**1) Why do you want to take this course?**

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**2) You will consider this program a success and worth the money if?**

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