

Operated by The MMBC Continuum

## CONTACT INFORMATION FOR PURPOSES OF THIS PROGRAM

Company Name

Contact Name

Title

Address:

Phone Number:  E-Mail:

Website:  NAICS Codes:

How did you hear about the Tennessee MBDA Business Center?  Internet  Partner Organization  Email  Client  Other

## DEMOGRAPHIC INFORMATION

### ▶▶ Ethnicity of Majority Business Ownership

- African American  Hispanic or Latino  
 Asian American  Native American  
 Hasidic Jew  Pacific Islander  
 Other, please specify:

### ▶▶ Gender of Majority Business Ownership

- Female  Male

### ▶▶ Please indicate any certifications that you have

- MBE/LSB/SBE/DBE  Other   
 8(a) Certification   
 VOSB/SDVOSB  
 HUBZone

### ▶▶ Please provide the name(s) of the certification agency or program(s) responsible for the above certifications

## BUSINESS INFORMATION

▶▶ Date Established:

### ▶▶ What is your current business status?

- Start-up (generated revenue < 3 years)  
 Existing (generated revenue > 3 years)

### ▶▶ What is the legal structure of your company?

- Corporation (S or C)  Sole Proprietor  
 Limited Partnership (LP)  General Partnership (GP)  
 Limited Liability Company (LLC)

▶▶ In what state is your company legally organized?

▶▶ How many employees does your company have (including you)? (Leave blank if not yet in business)

Total:  Part-Time:  Full-Time:  Minority Employees:

▶▶ What is your current annual revenue:  500k and above  below 500k

▶▶ What services are you interested in?  Business Consulting  Business Match-Making  Contract Opportunity Sourcing  Capital Sourcing  Other