RFQ 25-D003 Response

Contact Information:

Applicant/Organization Name:					
Address:					
Phone:					
Email:					
All applicants must complete information below. If you are applying on behalf of an organization, business, non-profit or other institution, please provide information relative to the project lead.					
General :					
1. Please list the names of any educational institutions you have attended and the degrees you obtained.					
2. Are you fluent in a language other than English? If yes, please specify below.					
3. If selected, h	ow many hours per week would you be available (19 hours maximum):				

5. There is significant reporting associated of proficient in Microsoft Office (Word, Exceedatabase tracking systems. Do you meet Yes No	el, and PowerPoint) as well as internet-based
Areas of Individual Specialization-Please cl	heck the boxes below next to the areas of
<u>expertise:</u> Fur	nctions
☐ Access to Capital	☐ Government Certification
☐ Accounting	(including 8A) & Contracts ☐ Human Resources
☐ Alternative Financing	☐ LEED Certification
☐ Business Expansion☐ Business Plans	☐ Loan Packaging Assistance
☐ Business Sales and Marketing	☐ New Product Launches
☐ Cash Flow	☐ Payroll
☐ Contracting and Procurement	☐ Permits & Licensing Information
☐ Corporate Structuring	☐ Projections
☐ Credit Improvement	☐ Quickbooks Basics
□ E-Marketing	☐ Social Media
☐ Effective Management	☐ Strategic Planning
☐ Entrepreneurial Success Strategies	☐ Tax Information
☐ Export/Import Assistance	☐ Venture Capital Funding
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Industries

☐ Construction☐ Cosmetics☐ Entertainment	☐ Retail☐ Service☐ Sustainable Technology					
☐ Franchise☐ Green Technology	☐ Technology☐ Transportation & Warehousing					
☐ International Trade	☐ Architecture & Engineering					
☐ Legal Issues	\square Professional Services: Accounting					
	Professional Services: Legal					
☐ Manufacturing	☐ Apparel					
☐ Medical☐ Restaurant	☐ Financial Services☐ Educational Services					
	☐ Science & Technical Services					
Other (please specify):						
Questions (limit answers to 1-2 paragra	phs):					
1. In 200 words or less, please describe in working with small businesses.	 In 200 words or less, please describe any relative experience you or your organization have in working with small businesses. 					

2.	Please describe your knowledge of the general challenges faced by small business owners. How will you or your organization best assist with these challenges?
3.	At what stage of a company are you or your organization most comfortable working with, start-ups or existing businesses? At which revenue thresholds (i.e. \$1-\$300k; \$300k-1M; \$1M-\$10M; or more. Please describe in 200 words or less):
4.	The economic development programs at LBCC are held to strict performance standards. How would you or your organization directly or indirectly help our clients achieve one or more of the following outcomes: (1) increase in sales (domestic or import/export sales); (2 creation of new jobs or retention of existing jobs; (3) creating a new business; (4) access to capital (loans/equity/debt/venture capital).

5.	What type of capital (i.e. loans/VC) have you or your organization assisted small businesses in obtaining; how long ago; and what is the typical size of the loan(s) (please describe in 200 words or less):
6.	Explain how you or your organization will attract and onboard small business clients into the Economic Development programs at LBCC (please describe in 200 words or less):
Re	eferences:
	ease list at least two but no more than three references. Additionally, please provide details the kind of work you did for them, including any consultation or advising.
Re	eference 1
Na	ame:
Tit	:le:
Or	ganization/
De	epartment:
Ph	one:

Email Add	ress:
Details:	
Reference	2
Name:	
Title:	
Organizati Departme	
Phone:	
Email Add	ress:
Details:	
Referen	ce 3
Name:	
Title:	
Organizati Departme	
Phone:	

Email Address:						
Details:						
Please include the following with your application: 1. Resume (if applying as an individual) or Summary of Organization 2. W-9 form						
By signing this response to the Request for Qualifications, I am attesting that information provided is true and accurate, and I have the authority to issue this proposal on behalf of my firm.						
Print Name	Title					
Signature	Date					