

**Application for Contra Costa Small Business Development Center's  
Practical Business Planning  
10 - Week Course**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_  
(F) \_\_\_\_\_ E-mail \_\_\_\_\_

What is your business idea? \_\_\_\_\_

1. Why do you think this is a good opportunity? \_\_\_\_\_  
\_\_\_\_\_

2. What are the products and/or services you plan to offer? \_\_\_\_\_  
\_\_\_\_\_

3. Who is your (target market) potential customer? \_\_\_\_\_

4. Who is your competition? \_\_\_\_\_

5. How serious are you about starting a business? \_\_\_extremely\_\_\_very\_\_\_somewhat

6. Do you have "hands-on" experience with the type of business you plan to open? \_\_\_yes\_\_\_no

7. If yes, please list \_\_\_\_\_

8. If no, how do you envision this business succeeding? \_\_\_\_\_  
\_\_\_\_\_

9. Why do you want to, or why did you, start your own business? \_\_\_\_\_  
\_\_\_\_\_

10. Have you established a business identity yet? *Please check all that apply.*

\_\_\_Printing Business Cards\_\_\_Printing Brochures\_\_\_Filing for Fictitious Business Name

\_\_\_Purchasing a Business License\_\_\_Business only Checking Account

\_\_\_Other \_\_\_\_\_

11. How much revenue do you expect your potential business to produce? \_\_\_\_\_

12. How much money do you estimate it will take to start this business? \_\_\_\_\_

OVER

13. Do you have this amount or the ability to borrow the money? \_\_\_\_yes\_\_\_\_no
14. Do you have good credit? \_\_\_\_yes\_\_\_\_no
15. Are you a self-starter? \_\_\_\_yes\_\_\_\_no
16. Do you like to sell? \_\_\_\_yes\_\_\_\_no
17. What computer software do you use? Please list \_\_\_\_\_  
\_\_\_\_\_

18. What was the highest grade in school you have completed? \_\_\_\_\_
19. What, if any, business classes have you previously taken? \_\_\_\_\_  
\_\_\_\_\_

20. Are you interested in a 10-week training program, which involves attending class once per week ,

Tuesday from 9AM-12:00PM 3 hours per session? \_\_\_\_yes\_\_\_\_no

Or

Thursday from 6:00PM-9:00PM 3 hours per session? \_\_\_\_yes\_\_\_\_no

Are you willing to spend at least 3 hours a week on homework? \_\_\_\_yes\_\_\_\_no

21. The program has 10 classes. How many classes will you attend? \_\_\_\_\_
22. There is homework given in each class (which relates directly to your business). It is expected for you to do the homework each day.  
Do you have the time to dedicate to this commitment?  
\_\_\_\_yes\_\_\_\_no
23. It is expected for you to finish a business plan, for your business, by the end of the 10 weeks. Will you complete this? \_\_\_\_yes\_\_\_\_no
24. If accepted into this training program most likely your tuition will be paid by the Community Development Block Grant. You will be asked to contribute a non-refundable \$300.00 registration and application fee when you register.
25. If you accept CDBG assistance, CDBG requires 100% documentation of your household income and business start (copies of your tax returns and business license).