

DreamBuilder

LIVE

APPLICANT INFORMATION	
Name:	
Address:	

Phone: _____

Email:_____

<u>GOALS</u>

What are your entrepreneurial goals in the next year to five years?

1 YEAR	3 YEARS	5 YEARS



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BUSINESS INFORMATION				
Are you already in business?	Yes	No		
If yes, is this your only employment?	Yes	No		
How will taking this class help accomplish you	r goals?			

Please describe your business and/or idea.

What's your motivation to start this business? Or, why did you start your business?

Do you have the necessary industry license(s) to work in your chosen field?	Yes	No
(Answer only if applicable.)		

If no, what is your plan to attain the industry license(s)?



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Describe any management experience you have.

How much do you project it will cost to start your business?			\$	
How much have you saved toward that goal?			\$	
CHOLARSHIP				
Do you intend to apply for a scholarship to he	lp pay for the \$350	course fee?	Yes	No
If yes, please provide one of the followi paystubs, or Form 1099 for scholarship		ear's tax return, y	our two mosi	t recen
Are you already in business?	Yes	No		
f yes, is this your only employment?	Yes	No		
*If you had a business, please include y please communicate to us what your to		• •	•	iem yei
pieuse communicate to us what your to				
How many adults live in your household?				

Thank you for applying for DreamBuilder Live! A representative from The Iowa Center will contact you soon regarding your application and acceptance status.

FOR INTERNAL USE O	NLY
Acceptance Date:	
Payment Date:	
Approval Signature:	