

APPLICANT INFORMATION

Name: _____

Address: _____

Phone: _____ Email: _____

GOALS

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

1 YEAR	3 YEARS	5 YEARS

What expectations do you have from this class?

Share 1-3 personal and/or entrepreneurial goals you'd like to accomplish from completing this class.

How will taking this class help you accomplish your next year to five year entrepreneurial goals?

BUSINESS INFORMATION

Are you already in business? Yes No

If yes, is this your only employment? Yes No

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)?

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? \$ _____

SCHOLARSHIP

Do you intend to apply for a scholarship to help pay for the \$250 course fee? Yes No

If yes, please provide one of the following: a copy of last year's tax return, your two most recent paystubs, or Form 1099 for scholarship consideration.

Are you already in business? Yes No

If yes, is this your only employment? Yes No

**If you had a business, please include your 2018 tax return. If you have not completed them yet, please communicate to us what your total sales and net income were during 2018.*

How many adults live in your household? _____

How many children live in your household? _____

How many individuals do you support besides yourself? _____

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

FOR INTERNAL USE ONLY

Acceptance Date: _____

Payment Date: _____

Approval Signature: _____