

## The University of Texas Rio Grande Valley (UTRGV) ScaleUp Rio Grande Valley

## **Program Application**

ScaleUp Rio Grande Valley is accepting applications for its fifth cohort (group training), starting September 2017. The application period for the cohort is open until September 1, 2017. A complete application with proof of revenues must be received together to be considered for the program. Please note: the program accepts only one participant per legal business entity.

For any questions regarding the application process, please send your concerns to <u>scaleup@utrgv.edu</u> or call (956) 665-7535.

#### Participant Name

Participant First and Last Name		Participant Title with in Business	
Participant Email		Participant Cell Phone Number	
Does the Participant have Authority to make business decisions?  Yes No			
Business Owner(s)			
Business Owner F	irst Name	Last Nam	16
Business Owner Email		Cell Phone Number	
Business Owner Demograp	Race		Veteran
<ul> <li>Hispanic or Latino</li> <li>Not Hispanic or Latino</li> <li>Prefer not to answer</li> </ul>	<ul> <li>American Indian or Alaska Native</li> <li>Asian</li> <li>Black or African American</li> <li>Native Hawaiian or Other Pacific Islander</li> <li>White</li> <li>Prefer not to answer</li> </ul>		
Business Ownership:	% Male % F	Female % Vete	eran Owned

# Preferred Mailing Address

Street Address			
City	State	Zip	Code
Business Information			
		□Sole Proprietor	
Full Degistered Dusiness Name			
Full Registered Business Name		Business Leg	gal Structure
Type of Business		Business I	ndustry
		Dusiness i	naasti y
Business Address			
Business Physical Address			
City	State	Zip	Code
Business Phone		Business Email	
Business Website			
What is your title within the business?			
Has the applicant business (named above	) been operationa	l for at least two (2)	years?
□ Yes □ No			
Date Business was established:			
MM/DD/YYYY			
Do you have at least two employees?	□ Yes	□ No	
Number of full-time employees in the app	licant business?		
Number of part-time employees in the ap business?	plicant		
Number of contracted labor in the applica	ant business?		

### **Annual Revenues**

Are your annual revenues for the applicant business between \$150,000 and \$500,000?

□ Yes □No

Please provide your business revenues for tax years 2014, 2015, and 2016. If selected for UTRGV ScaleUp, you will be asked to provide copies of your business tax returns for documentation purposes. (Copies must be submitted with Application)

\$	\$	\$
2014 Revenues	2015 Revenues	2016 Revenues

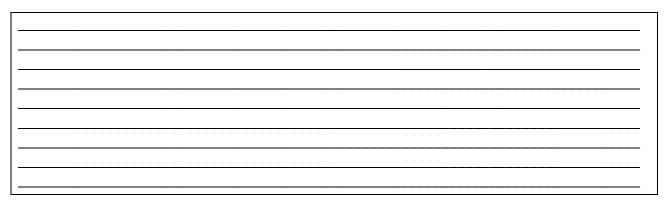
Is the applicant business currently cash-flow positive?

□ Yes □No

### Describe the products/services of the applicant business.



Describe the market potential for growing the applicant business to the next stage, including information on the competition, environmental influences, market barriers, and industry opportunities, as applicable.



What new products and/or services do you plan to offer in the next three years through the applicant business?



As the owner of the applicant business, what mistakes have you made in growing your business and what did you learn from them?

As a leader in the business, in what areas do you need the most help to move your business forward?



Why do you want your business to grow now? How do you plan to achieve that?


### How did you hear about ScaleUp Rio Grande Valley?

For which cohort would you like to be considered? 

English 

Spanish

□ Cohort 5 – Tentative dates: (9/21, 9/28, 10/5, 10/12, 10/19, 10/26, 11/2, 11/9, 11/16, 11/30, 12/7, 12/14) (Location TBD)

□ I affirm the above to be true and accurate. I understand that if chosen for ScaleUp Rio Grande Valley, tax returns and references will be requested, and an interview and/or site visit will be necessary before I am accepted to the program.

Signature

Date

#### For Office Use Only

Meets Revenues:	🗆 Yes 🗆 No	
Meets Years:	🗆 Yes 🗆 No	
Waiver Requested	: 🗆 Yes 🗆 No	Waiver Obtained: 🛛 Yes 🗆 No
Advisor:		



The UTRGV ScaleUp Rio Grande Valley program is funded in part through a contract with the U.S. Small Business Administration. Reasonable arrangements for persons with disabilities will be made, if requested at least two weeks in advance. Assistance for the hearing impaired can be attained by calling the TDD at (956) 665-5071.