



Application

Your Name: _____ Business Name: _____

About You

About Your Business

Address:

Address:

City: _____ Zip _____

City: _____ Zip _____

Telephone:

Telephone:

Fax:

Fax:

Mobile:

Mobile:

E-mail:

E-mail:

1. Please describe your business.
2. How long have you been in business?
3. How many full time employees do you currently have? Part time?
4. How did you hear of FastTrac?
5. Please check, estimate if necessary:

2007 Sales

(\$ in thousands) __ 0 - 15 __ 16 - 50 __ 51 - 100 __ 101 - 500 __ 501 - 900 __ 901+

2008 Sales

(\$ in thousands) __ 0 - 15 __ 16 - 50 __ 51 - 100 __ 101 - 500 __ 501 - 900 __ 901+

6. Please explain why you would like to take FastTrac and what you hope to gain.

Tuition is shown below. Two people from the same business may attend for a single tuition.

__FastTrac Growth Venture \$650.00 __Fast Trac NewVenture \$550.00

Name on Credit Card (VISA or MC) _____

Number _____ **Expiration date** _____

***FastTrac* Scholarship Application**

Business Name

Please explain why a 50% scholarship would be beneficial to you and your community.

Scholarship checks are issued after graduation. Graduation is dependent upon the completion of the business plan and attendance at eight of the ten sessions.