

see as your current significant challenge(s)?

Office of Minority Business Development & Capital One Mentorship Program Application Deadline: 06/01/2021



Application Date: _____ **Company Name** Address City, ST, and Zip **Contact Name** Telephone # E-mail Address M/WBE category African American Asian American Hispanic American Indian/Pacific Islander
Native American Women Other LGBT % Ownership ⁻ 67-100% ⁻ 50% ⁻ 51-66% **Services Offered** Please rank 1-3 (1 being your first choice) which area is of most interest to you: Brand/Communications: How a business communicates with others, share its values, and shows its impact. Data: How a business analyzes and uses information collected to assess and evaluate the business and its work. **Design:** How a business creates and plans services, products, and experiences for customers. Finance: How a business handles daily and long-term monetary operations, strategy, and resource Legal: How a business prevents and handles legal issues. Operations: How a business initiates, plans, and carries out business and day-to-day tasks. Strategy: How a business identifies strategies that will best enable the advancement of its mission. **Technology:** How a business uses technology to support its mission, work, and reporting. Use this space to answer the following questions. Brief Company **Background:** What do you

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. How le	ong have you been in bus	uring the pre-selection process: iness?
	Less than one year	
b.	2-5 Years	
C.	6-10 Years	
d.	More than 10 Years	
2. What	is you gross revenue?	
a.	Less than \$100K	
b.	\$100k- \$ 1.0 Million	
C.	Greater than \$1 Million	
3. How r	nany employees do you h	ave?
a.	Less than 5	
b.	6-10	
C.	11- 25	
d.	Greater than 25	
4. How r	nany customers do you ha	ave?
a.	Less than 15	
b.	16-30	
C.	More than 30	

Instructions:

After thoroughly completing the application, please print and email it to: gsaez@gwhcc.org