

# Program Application

## Bright Idea to Business Plan - Building Your Youngstown Food and Farm Business

Please return this application to the YNDC no later than March 19, 2014 to be considered for this program. If an overwhelming number of applications are received, they will be prioritized based on project readiness, need, and geographic location. If you are not selected for the program, we still want to help you reach your dreams! We will contact you to schedule a one on one assistance session. Please mail your application to YNDC, 820 Canfield Road, Youngstown, OH 44511 or email to Sophia Buggs at [sbuggs@yndc.org](mailto:sbuggs@yndc.org). Thank you!

### Contact Information

Name \_\_\_\_\_

Business Name(if applicable) \_\_\_\_\_

Personal Address \_\_\_\_\_

Business Address \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Why are you interested in this program?

What is your business idea? What are you selling, or what service are you providing?

Are you able to commit to attending all classes, include the business plan presentation?

What do you hope to learn from the class?

What do you need to make your business a success?

Would you like to meet one-on-one with staff from Iron Roots Urban Farm or the Common Wealth Kitchen Incubator to discuss your business idea?

## COMMUNITY ECONOMIC DEVELOPMENT INFORMATION

This page will collect basic data on entrepreneurs that will be used to track job creation and economic development in food based businesses for federal grants. This will help YNDC and Common Wealth get a snapshot of your new business that can be updated in the future as your business develops. All information collected will be kept strictly confidential, and will only be used for internal grant tracking purposes. We will never share this information without your express permission.

### Current Employment/Income Information

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ When Hired: \_\_\_\_\_

Hours/Week: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_

Do you currently receive income from your food-based business? \_\_\_\_\_

Estimated Monthly Income (personal income - after business expenses): \_\_\_\_\_

Is your business incorporated? \_\_\_\_\_ If so, when? \_\_\_\_\_

Number of People Living in Your Household \_\_\_\_\_

Monthly Household Income from all sources (Before Taxes, including business income) \_\_\_\_\_

Do you live in the city of Youngstown? \_\_\_\_\_

What is your zip code? \_\_\_\_\_

### Do currently receive assistance from any of these programs?

Food Stamps/SNAP:  Yes  No

Disability:  Yes  No

TANF:  Yes  No

Unemployment:  Yes  No

Other Public Assistance:  Yes  No

### Demographic Information (optional)

Gender:  Male  Female

Race:  American Indian or Alaska Native  Asian  Black or African American

Native Hawaiian or Other Pacific Islander  White  Other \_\_\_\_\_

Ethnicity:  Hispanic or Latino  Not Hispanic or Latino Foreign Born:

Veteran:  Active Military:

Disabled:  Disabled Dependent(s):

Education:  College  High School/GED  Vocational  Primary  None

I certify that the above information is correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_