

Mentor-Protégé Program Application

	licate which designation vo	u are applying for in the Princ	e George's County Men	tor-Protégé	
Program					
Mento	or	Protégé	(County-based sma		
		Applicant Informati	on		
Legal Business Name:				Date:	
Business Address:					
City	y		State	ZIP Code	
Business Phone:		Internet Web Page			
Business Structure:		leral Employers ntification No.:	Date Bu Establ		
Owner Name & Title :		E-Mail Add	ress:		
(01) Heavy (02) Buildin (03) Special (04) Financi (05) Archite (06) Other I (07) Non-Pr (08) Medica	Construction other than E ng Construction, including I Trade Construction ial and Accounting Service ectural/Engineering and S Professional Services inclurofessional Services al and Health Services	General Contractors and Opes es urveying			

Area of Expertise – Please check all boxes that indicate area of expertise your business possesses as a Mentor (if applicable) and willing to make available to approved Protégé **OR** check all boxes that indicate areas in which your business is seeking assistance as a Protégé (if applicable).

(1) Business Planning(2) Business Writing Skills(3) Business Legal Issues(4) Blueprint Reading(5) Bonding & Insurance(6) Bookkeeping/Accounting(7) Bidding(8) Cost Estimating(9) Banking Services(10) Business Permits(11 Preparing Job Budgets(12 Competitive Market Place

(16) Project Planning& Management (19) Personnel Management (22) Business Financial Planning (25) Special Trade Construction	(17) Business Technology(20) Government Procurement(23) Operations Budgeting(26) Organizational Structure	(18) Government Bidding (21) Quality Assurance (24) Construction Management (27) Other – Please describe:
Does your company currently have any contra	acts with Prince George's County Gove	ernment: Yes No
Has your company completed any contracts w Prince George's County Business Certification		ent: Yes No
Professional License(s):	npany, including the company profile,	=
Describe how the company will provide the ne relationship. Additionally, indicate areas of but as business planning, scheduling, records man	usiness in which the company is able t	o offer guidance and training, such
Is your company currently participating in any If yes, identify the program and provide a brie Mentor-Protégé Programs (agreements):		
Does your company possess as a Mentor (if agor training programs? Yes No If Yes please describe:		pplicable), any specialized education
Please describe your company's goal(s) in bec	oming a Mentor or Protégé through t	he Prince George's County Program:

Are you willing to enter into a written agreement with a Mentor (if applicable) or Protégé (if applicable) outlining the

goals and objectives of your potential Mentor-Protégé relationship though the Mentor-Protégé Program?

Yes _____ No ____

(14) Business Market Analysis

(15) Business Management

(13) Business Presentation Skills

Printed Name of Business Owner or Authorized Representative	
this document, I understand that participation in the Prince Geomeither a guarantee of a contract opportunity nor a promise of b to develop protégé capacity in becoming self-sufficient, competitudersigned, on behalf of the business participating in the Progra officials and agents shall conduct themselves at all time in accordappropriate business conduct.	ousiness. I also understand that the Program's intent is tive and profitable business enterprise. I, the am, agree that the business and all of its employees,
As evidence of my signature below and being an owner or autho	rized representative of the business identified within