

Wisconsin Minority Business Management Seminar Student Application



1. Name _____
Title _____
Business _____
Address _____
City _____ State _____ Zip Code _____
Business Phone _____ Home Phone _____
E-mail _____ Country _____

2. Business Information

- Manufacturer
- Distributor
- Construction Contractor
- Architecture/Engineering
- Consultant/Professionals
- Service Contractor
- Other _____

Briefly describe your business:

Who are your customers?

Years in business: _____

Check Minority Status:

- Asian Indian
- Asian Pacific
- Black
- Hispanic
- Native American

Do you own your firm?

- Yes - What percent? _____
- No

Number of employees: _____
Number of part-time employees: _____
Number of full-time employees: _____

2005 Sales Volume \$ _____
2006 Sales Volume \$ _____
2007 Sales Volume \$ _____

Years of business management experience: _____

Years of business ownership experience: _____

Highest level of education completed: _____
College major, if any: _____
Graduate degree specialization: _____

Proficient skill areas:

- Information Technology/Computers
- Marketing/Sales
- Accounting
- Legal
- Other _____

Business Experience (Continue answers on separate sheet if necessary)

3. Describe your role in managing your business.

4. What have you found to be the two greatest challenges of being the owner/manager of your firm?

5. Please specify the knowledge, skills and benefits you expect to acquire from participating in the Minority Business Seminar.

6. Please summarize your firm's business objective for the next five years.

7. Do you have any special food or physical needs?

8. Finance

Which of the following are your main concerns regarding your personal finances? (Education; Retirement; Estate Planning; Tax Management; Investments; Creating a Comprehensive Plan; Other)

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- Education
 - Retirement
 - Estate planning
 - Tax management
 - Investments
 - Creating a comprehensive plan
 - Other: _____

How would you rate your financial knowledge?

- Novice
- Fair
- Good
- Expert

What is the main concern for your business finances?

- Cash management
- Financing
- Succession planning
- Retirement planning
- Other: _____

Signature

Date

Student Participation Fee

There is a student participation fee of \$3,500 (USD) for this seminar, which includes lodging, meals and classes. Students **without** full sponsored scholarships must include this fee with their registration application materials. Make checks payable to: Business Management Seminar, Inc.

Amount: \$ _____

Credit Card #: _____ Expiration Date: _____

Credit Card Holder Name: _____

Credit Card Holder Billing Address: _____

Please sign and forward completed student application and remittance to:

Business Management Seminar, Inc.
Attn: Dr. Floyd Rose
Post Office Box 951, Madison, Wisconsin 53708-8577
wscroese@aol.com