



## MICROBUSINESS/ENTREPRENEURIAL SUPPORT APPLICATION

Thank you for applying for support from **HER POTENTIAL**.

Please complete this application in full. Please include a resume and a business plan and return to Elsa Erickson at [Info@HerPotentialInc.org](mailto:Info@HerPotentialInc.org).

### PROCESS AND SELECTION

The maximum scholarship amount is \$1,500. **If awarded, the scholarship will be paid directly to the vendor, i.e. school, store, consultant, etc. Scholarship payments are not awarded to the individual candidate.** As you complete the application, please feel free to use additional pages if needed.

A representative from **HER POTENTIAL** will contact you to discuss your application. All applicants are required to meet with a review committee via Zoom. Please indicate your first, second, and third choice for a meeting:

☐ Weekday mornings      ☐ Weekday afternoons      ☐ Weekday evenings

### CONTACT INFORMATION

Full Name:

Street Address:

City:                      State:                      ZIP Code:

Cell Phone:                      E-Mail Address:

Current monthly income:

How did you hear about the **Her Potential Program**?

### PURPOSE OF SCHOLARSHIP

Amount of Request:

Please tell us how you plan to use the Award Program funding for your business if you are approved:

|                        |                 |
|------------------------|-----------------|
| Office Space           | Marketing       |
| Tools or equipment     | Consulting Fees |
| Other – Please explain |                 |

What are your employment or career goals?

How will financial assistance from **HER POTENTIAL** support your employment or career goals?

Please describe your business, including name, website, and social media accounts.

Is this a new business?      Yes                      No

If you have a business plan, please attach it to this application. If you do not have a business plan, please answer the following questions:

**If this is an existing business, please describe:**

Current revenue and expenses:

Current clients:

Current marketing efforts:

**If this is a new business, please describe:**

How will you market and promote your business?

Please describe prospective clients:

## SPECIAL SKILLS AND QUALIFICATIONS

What types of skills and/or training do you want to develop?

Summarize any special skills and qualifications you have acquired from employment, volunteer work, or through hobbies, sports, or other activities.

## EMPLOYMENT HISTORY

Please summarize your employment history. **Please submit a resume.**

## EDUCATION/TRAINING HISTORY

Please summarize your education history.

In what way would you consider giving back to your community if you are awarded a scholarship? A few examples of ways to give back include: volunteering or pursuing a career with a non-profit, become a donor to a non-profit, offer a presentation to a group of women that may inspire them, etc.

Name (print):

Date:

Signature:

## EQUAL OPPORTUNITY POLICY

HER POTENTIAL provides equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.