

# Lackawanna County Women, this is for you!

Women Win!



start grow prosper



Presented by:



Small Business Development Center

The University of Scranton

Helping businesses start, grow, and prosper.

## When is it?

Women Win! is a 4-part series on **Wednesdays, October 8, 15, 22 and 29\*** from 9 a.m. to 12 p.m.

at The University of Scranton

*Parking, continental breakfast, and materials included. Participants are responsible for own transportation.*

**\*Participants must attend all 4 sessions.**

## How do I register?

Return attached application by **September 30!**

**Only 15 seats available!**

Participants will be accepted on a first-come, first-served basis. Once your form is received, we will contact you with more information!

## How much does it cost?

Women Win! is FREE to participants, thanks to our winning sponsors!



Center for Professional Training & Development

Special thanks to partner: **EOTC**

### What will I learn?

- entrepreneurship and start-up basics
- to use computers for research
- all about financing
- how to set goals
- more about yourself through fun exercises
- understanding forms and applications
- how to develop your own business plan
- ...and more!

### Plus this bonus opportunity!

Experienced local women entrepreneurs will share valuable information and lessons with the participants through a panel discussion during the last session!

For more information, please contact The University of Scranton SBDC

Phone: (800) 829-7232 Fax: (570) 941-4053

E-mail: [sbdc@scranton.edu](mailto:sbdc@scranton.edu) Internet: [www.scrantonsbdc.com](http://www.scrantonsbdc.com)

## Be the next Winner in small business - register today!

\*Funding support and resources are provided by the Commonwealth of Pennsylvania through the Department of Community and Economic Development; through a cooperative agreement with the U. S. Small Business Administration, and through support from The University of Scranton. All services are extended to the public on a non-discriminatory basis. Special arrangements for persons with disabilities can be made by calling 570-941-7588. All opinions, conclusions or recommendations expressed are those of the author(s) and do not necessarily reflect the views of the SBA.

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**APPLICATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone (daytime): \_\_\_\_\_ Email: \_\_\_\_\_

*The following information is voluntary and solely utilized to tailor the content of this series to you, the registrant, and for aggregate (group totals) statistical collection. All information is confidential in individual form.*

**Business Interest:**

I am interested in starting a \_\_\_\_\_ business **OR**

I'm not sure what business I'd like to start, but I may be considering this type \_\_\_\_\_

I would like to start my own business because \_\_\_\_\_

**Job Experience:**

\_\_\_\_ I have never operated a business before

\_\_\_\_ I have had an operating business for \_\_\_\_ years. Type of Business: \_\_\_\_\_

\_\_\_\_ I once operated a business for \_\_\_\_ years. Type of Business: \_\_\_\_\_

Reason you are no longer operating the business: \_\_\_\_\_

\_\_\_\_ I am not self-employed, but work (type of job): \_\_\_\_\_

\_\_\_\_ In the past, I have worked as: \_\_\_\_\_

**Education:**

\_\_\_\_ Some high school/vo-tech      \_\_\_\_ High school/vo-tech graduate      \_\_\_\_ GED

\_\_\_\_ Some college. My major was: \_\_\_\_\_

Finished \_\_\_\_ 2-year / \_\_\_\_ 4-year college degree in: \_\_\_\_\_ Other (please explain): \_\_\_\_\_

**Computer Knowledge:**

I (circle one): **own** / **do not own** a computer.      If you do not own (circle one): **I have access to** / **no access to** a computer.

\_\_\_\_ I do not know how to use a computer.

\_\_\_\_ I have limited computer knowledge, but I don't really know how to use specific programs.

\_\_\_\_ I know how to use (check all that apply) \_\_\_\_ Microsoft Word \_\_\_\_ Microsoft Excel  
\_\_\_\_ Other Programs (please list) \_\_\_\_\_

**About Me:**

In my spare time, I enjoy the following hobbies: \_\_\_\_\_

Right now, the biggest challenge in my life is: \_\_\_\_\_

I feel my personal financial situation is: \_\_\_\_\_

I maintain a (check all that apply): \_\_\_\_ savings account \_\_\_\_ checking account \_\_\_\_ loan account(s)

My credit is (check one): \_\_\_\_ good \_\_\_\_ bad \_\_\_\_ I don't know

My primary income source is (check one): \_\_\_\_ SSI \_\_\_\_ SSDI \_\_\_\_ earned wages \_\_\_\_ welfare/TANF \_\_\_\_ Other: \_\_\_\_

I (check all that apply): \_\_\_\_ own a home \_\_\_\_ rent a home \_\_\_\_ neither

**Return completed form to SBDC (contact information at top of page) by September 30 to be considered for the program. Space is limited and applicants will be accepted on a first-come, first served basis.**