

**Small Business Assessment
Advisory Committee
APPLICATION**



Please complete the following information and submit with current resume or biography to the email address below. Application process is open until January 8, 2019

PERSONAL INFORMATION

Name: _____
Home Address: _____
City: _____ State: _____ Zip: _____
City of Residence: _____ Columbus Neighborhood: _____
Primary Phone Number: _____ Preferred Email Address: _____
Birthdate (Month/Day/Year): _____ Gender _____
Ethnicity (Optional): _____ LGBTQI (Optional): _____
Educational Background: _____

EMPLOYMENT or BUSINESS INFORMATION (As Applicable):

Occupation/Employer or Business: _____
Title/Position Within the Organization: _____
Work or Business Address: _____
City: _____ State: _____ Zip: _____

Please check the box below that most adequately represents the stakeholder group you or your organization represent.

- Business and Industry
- Small Business and Entrepreneurial Leadership
- Chambers and Business Association
- Business Development and Entrepreneur Support Organizations
- Philanthropic Support and Impact Investing
- Entrepreneurial Talent Pipeline (Development)
- (Financing and) Capital Access and CRA Opportunities
- Social Enterprises, Faith, and Community-Based Not-For-Profit Organizations
- Member-at-Large

QUESTIONS:

1. Please list any civic, charitable, cultural, entrepreneurial, or community-related organizations of which you have been a member.

2. Please share your experience in your professional field.

3. What inspires your interest in becoming a member of the Small Business Assessment Advisory Committee?
What insights would you bring to this work? (limit 300 words)

4. What do you consider to be significant challenges to the entrepreneurial ecosystem of Columbus? How do you see yourself helping to shape and craft solutions to those challenges? (limit 300 words)

5. Do you have, or have you had, any personal, financial or business interest or dealings that might present a conflict of interest with your appointment as a member of the Small Business Assessment Advisory Committee?

Yes No | If yes, please explain:

Submit completed application and current resume or biography via email to:

Email: DRBauer@columbus.gov

Mail or deliver to:

Attn: Office of the Mayor/ Small Business Assessment Advisory Committee

90 West Broad Street

Columbus, OH 43215

Telephone: 614-724-4438

Please be advised that the following information will be used to determine eligibility in consideration of a potential appointment to the Small Business Assessment Advisory Committee. Further, such information may be deemed a public record and may be disseminated where appropriate. Applicants must reside in Columbus, Ohio. In consideration of each applicant, the City of Columbus and Mayor's Office shall abide by all laws of the State of Ohio and the City of Columbus.