

*Tucson Urban League, Inc*  
**Microenterprise Training and Loans Project**

This information is intended to help provide you with the best services available. The Tucson Urban League will protect the confidentiality of all information provided.

YOUR NAME: \_\_\_\_\_ HOME PHONE: (520) \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP 857 \_\_\_\_\_

DO YOU LIVE:  INSIDE CITY LIMITS  OUTSIDE CITY LIMITS WORK PHONE: \_\_\_\_\_

HOW LONG HAVE YOU LIVED IN ARIZONA?

- LESS THAN 1 YR  1-3 YRS  4 - 10 YRS  11 - 15 YRS  16 - 20 YRS  MORE THAN 20 YRS

HOW DID YOU HEAR ABOUT THIS PROGRAM? \_\_\_\_\_

WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU HAVE COMPLETED ?

- NON-HIGH-SCHOOL GRADUATE  HIGH-SCHOOL DIPLOMA/GED  SOME COLLEGE  POST-GRADUATE DEGREE (Specify)

WHAT TYPE OF BUSINESS DO YOU OWN? (Check one)

- SERVICES  RETAIL TRADE  WHOLESALAE TRADE  AGRICULTURE/FORESTRY/FISHING/MINING  
 CONSTRUCTION  MANUFACTURING  FINANCE/INSURANCE/REAL ESTATE  TRANSPORATION/PUBLIC UTILITIES

IN ORDER OF IMPORTANCE TO YOU, PLEASE RATE WHICH SERVICES WOULD HELP YOU IN DEVELOPING YOUR NEW BUSINESS:  
 (1=most important, 2=somewhat important, 3=least important)

- Business training space/equipment/expertise  Loan services  Operations assistance:

IF NEEDED, DO YOU HAVE ANY ASSETS SUCH AS EQUITY IN A HOME, STOCKS, VEHICLES, OR CASH TO HELP CAPITALIZE YOUR BUSINESS?

- YES (Please Specify) \_\_\_\_\_  NO

IF YES, ARE YOU PREPARED TO USE THESE ASSETS TO COLLATERALIZE A BUSINESS LOAN?  YES  NO

DO YOU USE A PERSONAL COMPUTER AT HOME OR AT WORK?  YES  NO

WHAT SOFTWARE APPLICATIONS ARE YOU FAMILIAR WITH?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Business located in City Limits of Tucson  YES  NO

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

Tucson Arizona 857

Attached are two -two sided documents.

Document 1: The first document pertains to your business. One side will be utilized for a new business. The second side is for a continuing or expanding business. Please complete the side that applies to your situation. *Please remember that a existing business means you have a business license.*

Document 2: This document is an income affidavit and this information is utilized for verification of eligibility and for reporting to our funding source. Please answer all questions on side one. Side two gives a list of documentation that will be required for verification. *Please submit copies of this documentation.*

PLEASE DO NOT SUBMIT ORIGINAL DOCUMENTS.

# NEW BUSINESS Application

YOUR NAME: \_\_\_\_\_

1. BRIEFLY DESCRIBE YOUR BUSINESS IDEA:

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2. PLEASE PROVIDE BACKGROUND EMPLOYMENT INFORMATION BELOW:

Dates	Company	Address	Position

3. HAVE YOU EVER OWNED OR MANAGED A BUSINESS?  YES (IF YES, PLEASE DESCRIBE)  NO

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4. WHAT IN YOUR EXPERIENCE GIVES YOU THE BACKGROUND TO SUCCESSFULLY OPERATE YOUR OWN BUSINESS? \_\_\_\_\_

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5. DO YOU PLAN TO HAVE BUSINESS PARTNERS?  YES  NO

6. IF YES, WHO AND WHAT STRENGTHS WILL THEY BRING TO THE BUSINESS? \_\_\_\_\_

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7. DO YOU PLAN TO OPERATE YOUR BUSINESS WITHIN TUCSON CITY LIMITS?  YES  NO

8. INCLUDING YOURSELF, HOW MANY EMPLOYEES DO YOU EXPECT TO HAVE:

IN 1 - 2 YEARS? \_\_\_\_\_ FULL-TIME \_\_\_\_\_ PART-TIME

IN 3 - 5 YEARS? \_\_\_\_\_ FULL-TIME \_\_\_\_\_ PART-TIME

9. Additional comments, questions, or special needs you wish to communicate: \_\_\_\_\_

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\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**

**Thank you for your responses.**

Please submit your application to  
Tucson Urban League  
2305 South Park Avenue  
Tucson, Arizona 85713

## ***CONTINUING OR EXPANSION Application***

YOUR NAME: \_\_\_\_\_

1. NAME OF YOUR BUSINESS: \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

2. BUSINESS ADDRESS: \_\_\_\_\_ ZIP \_\_\_\_\_

3. LEGAL STRUCTURE OF YOUR BUSINESS?     SOLE PROPRIETORSHIP     PARTNERSHIP     CORPORATION

4. BRIEFLY DESCRIBE WHAT MAKES YOUR BUSINESS UNIQUE AND WHY YOU EXPECT YOUR BUSINESS TO GROW:

5. DESCRIBE THE PRINCIPAL WEAKNESSES OF YOUR BUSINESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. HOW LONG HAVE YOU OWNED YOUR BUSINESS? \_\_\_\_\_

7. DO YOU WORK FULL-TIME IN YOUR BUSINESS?     YES     NO    IF NO, HRS PER WEEK DEVOTED TO BUSINESS? \_\_\_\_\_

8. DO YOU HAVE ANOTHER JOB OUTSIDE OF YOUR BUSINESS?     YES     NO

9. IF YES, HOW MANY HOURS PER WEEK DO YOU WORK AT THAT JOB? \_\_\_\_\_

10. IF NO, WHAT OTHER BUSINESS OWNERSHIP EXPERIENCE HAVE YOU HAD? \_\_\_\_\_

11. INCLUDING YOURSELF, WHAT IS THE TOTAL NUMBER OF EMPLOYEES AT YOUR BUSINESS?    \_\_\_\_\_ FULLTIME    \_\_\_\_\_ PART-TIME

12. TOTAL REVENUE (BEFORE TAXES) OF YOUR BUSINESS LAST YEAR?    \$ \_\_\_\_\_

13. DOES YOUR BUSINESS HAVE A WRITTEN BUSINESS PLAN AT THIS TIME?     YES     NO

Additional comments, questions, or special needs you wish to communicate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**

**Thank you for your responses.**  
Please submit your application to  
Tucson Urban League  
2305 South Park Avenue  
Tucson, Arizona 85713

Dear Client:

The services being provided under this program are made possible by partial or total funding from HUD's Community Development Block Grant (CDBG) Program. Any agency receiving CDBG funding must gather income, ethnicity, and female head of household data from its clients. All information gathered is confidential and used for program eligibility use only.

CITY OF TUCSON
CLIENT ELIGIBILITY DHUD INCOME LIMITS

Table with 4 columns: NUMBER OF PERSONS, EQUAL TO OR LESS THAN 30% OF CITY MEDIAN INCOME, EQUAL TO OR LESS THAN 50% OF CITY MEDIAN INCOME, EQUAL TO OR LESS THAN 80% OF CITY MEDIAN INCOME. Rows include 1 Person family through 8 Person family with corresponding income limits.

This table, of the most recent client eligibility income limits set by DHUD, is to be used when determining client eligibility for City of Tucson CDBG-funded projects.

1. PLEASE PLACE AN "X" NEXT TO THE INCOME LEVEL RANGE THAT APPLIES TO YOUR FAMILY, BASED UPON THE ABOVE CHART.

- Extremely Low 30% or less, Very Low 50% or less, Low/Moderate 80% or less, ABOVE LOW/MODERATE Above 80%

2. PLEASE PLACE AN "X" NEXT TO THE ONE CATEGORY BELOW WHICH THE HEAD OF HOUSEHOLD MOST IDENTIFIES WITH. (SELECT ONLY ONE CATEGORY)

- White, Black/African American, American Indian/ Alaskan Native, Asian, Native Hawaiian / Other Pacific Islander, Asian & White, Black/African American & White, American Indian/ Alaskan Native & White, American Indian/ Alaskan Native & Black/African American, Other Multi-Racial

3. PLEASE PLACE AN "X" NEXT TO THE ONE CATEGORY BELOW WHICH THE HEAD OF HOUSEHOLD MOST IDENTIFIES WITH. (SELECT ONLY ONE CATEGORY)

- Hispanic, Not Hispanic

4. PLEASE INDICATE YOUR GENDER: MALE FEMALE

5. PLEASE INDICATE IF SINGLE FEMALE HEAD OF HOUSEHOLD: YES NO Please indicate household size: Persons

5. TOTAL HOUSEHOLD INCOME LAST YEAR: TOTAL EXPECTED INCOME THIS YEAR:

Client Signature: Date:

Please see reverse side for mandatory verification.

### ***GENERAL INFORMATION TO CONFIRM PROJECT ELIGIBILITY***

1. **Confirmation of family size.** This could be birth/baptismal certificates for all family members, Social Security cards, DES letter showing dependents.
2. Copy of **last year's federal tax return.**
3. If employed, a **letter from employer**, on company letterhead giving hours worked per week and hourly rate of pay or monthly salary. Also bring you two most recent pay stubs (if your earnings vary, we will need to see pay stubs for a longer period).
4. **If self-employed, a copy of federal income tax return showing income earned and business deductions** (Schedule C), or signed and dated statement form accountant containing gross income, expenses, net profit and business location plus a year-to-date statement of income and expenses for the current year.
5. If unemployed, a **document showing gross benefit amount received.**
6. If receiving welfare assistance please bring you **most recent award letter**, showing current amount received.
7. If receiving Social Security, Supplemental Security Income (SSI) or Pensions, **please bring most recent Social Security award letter or print-out** from the Social Security Administration for all family members receiving benefits.
8. If receiving Veterans benefits, please bring **current Veterans benefit award letter.**
9. If child support is being receiving, please bring **copies of check stubs or a print out from the Child Support Division.** If the payments are being paid directly to you from the child support provider, a letter confirming amount of payment should be obtained.
10. Assets. Please bring in your **most recent bank statements**, to confirm account number (s), balance (s) and rate (s) of interest paid. For bonds, trusts, mortgages held, please provide full details of value of assets held - ask eligibility representative for further instructions.

## ***NONDISCLOSURE AGREEMENT***

You are being granted access to information concerning the Tucson Urban League's Microenterprise Training and Loans Project (MTLP) and its participants. Such information discloses certain proprietary and confidential information (as set forth in greater detail below and referred to as "Confidential Information"), the disclosure of which would be extremely detrimental to the Tucson Urban League and its MTLP participants. It is a condition to your access to such information that you agree to keep this Confidential Information in strictest confidence, in the manner set forth below.

**You agree:**

NOT TO directly or indirectly, use any Confidential Information or the concepts therein for any purpose other than the purpose for which the Tucson Urban League or its MTLP participants are disclosing such Confidential Information to you.

TO HOLD THE TUCSON URBAN LEAGUE and its MTLP participants "Confidential Information" in confidence, and not to make "Confidential Information" available in any form to any third party or to use such Confidential Information for any purpose other than the implementation of this agreement. The breach of any term, covenant or provision of this Agreement may cause irreparable harm to the Tucson Urban League and its MTLP participants and, accordingly, the Tucson Urban League and its MTLP participants will be entitled to an injunction against any breach of any term or provision of this agreement together with any other remedy available at law or in equity.

"Confidential Information" means nonpublic information that the disclosing party designates as being confidential or which under the circumstances surrounding disclosure ought to be treated as confidential. "Confidential Information" includes, without limitation, information relating to the disclosing party's products, know-how, trade secrets, plans, designs, processes, formulas, manufacturing techniques, discoveries, methods, patentable or unpatentable ideas, inventions and ideas, product specifications, sales and marketing data and plans, pricing and cost information, customer and supplier information and any other technical or business information which is a party to this Agreement.

The validity, construction and performance of this Nondisclosure Agreement shall be governed by the substantive laws of the State of Arizona.

Please indicate your understanding and acceptance of the terms and conditions of this Nondisclosure Agreement by your signature below on your behalf.

Agreed to this \_\_\_\_\_ day of \_\_\_\_\_ (month, year.)

By:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

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