



Strategic Entrepreneurship (Advanced Core)

“Creating future value by the choices you make today”™

2009-10 Program Application

Name _____

Title _____

Company _____

BUSINESS

HOME

Address _____

Address _____

City _____

City _____

State _____ Zip _____

State _____ Zip _____

Telephone _____

Telephone _____

Fax _____

E-Mail Address: _____

Form of Business (Please check one) Family Sole Proprietor Partnership Corporation

Briefly describe your business (product or service): _____

What percentage of the company do you own (100%, 75%, etc.)? _____

How long have you been in business? _____

Do you have a business plan? _____ Do you have a strategic plan? _____

What were your approximate revenues/sales last year? _____

How many employees do you have? _____

Where would you like to see your business in five years? _____

Briefly describe your entrepreneurial abilities and strengths: _____

Apply online or print this application and fax back or mail to the CEL offices today

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