

# It's Your Time: An Entrepreneurial Training Series for Women

Presented by the Coachella Valley Women's Business Center

## What is "It's Your Time: An Entrepreneurial Training Series for Women"?

It's Your Time: An Entrepreneurial Training Series for Women (IYT) is an intensive business start-up program with the goal of helping women entrepreneurs become business owners. Participants will attend a minimum of 10 workshops, work individually with a business counselor for at least two hours, complete a vision board, and write a business plan. Upon completion of the IYT program, selected participants will be awarded a prize package based on the quality of their business plans.

## Who is eligible?

To be eligible you must be a woman living in Riverside or San Bernardino County and ready to start a business. It is important you have a well-thought-out idea of what you want to accomplish as a business owner.

## Investment:

The IYT program is offered at minimal cost with investments starting at \$30 to \$130 depending on your income bracket. Program value is over \$500 for just the workshops, exclusive of the free counseling and mentoring. Income brackets are determined by the self-certification form included in the application. Your outlay for the program is due when you pick up your pre-orientation packet. Proof of income will be required. (Examples of proof of income include: tax returns, unemployment statements, or pay stubs).

## How do you apply?

1. Complete this application.
2. Write a one page essay about the business you want to start or grow (last page).
3. Include a recent (within the last 6 months) letter of reference from a family member, friend, or colleague specifically regarding your participation in the It's Your Time program.
4. Be available to attend orientation **August 16, 2017** from 6:00 p.m. to 8:30 p.m., and the midpoint on **October 4, 2017** from 6:00 p.m. to 8:30 p.m.
5. Submit the application packet to Kim Scanlan via email: [kscanlan@cvwbc.org](mailto:kscanlan@cvwbc.org), or mail to 77806 Flora Road, Suite A, Palm Desert, CA 92211 by **Friday, August 4, 2017** before **5 p.m.**

\*\*For additional information call (760) 345-9200 or visit [www.cvwbc.org](http://www.cvwbc.org). All applications **must** be typed. Late or incomplete applications will **not** be accepted.

## How are participants selected?

Judges will review all completed applications. An oral interview is required.

## When will the selected participants be notified?

Program participants will be notified by phone or email no later than **August 14, 2017**.



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## Application

**DEADLINE:** Friday, August 4, 2017 by 5 p.m.  
No **late** or **incomplete** applications will be accepted.

First Name:		Last Name:		Middle Initial:
Address:				
Apt #:		City:		Zip Code:
Phone:		Ext.:		Cell:
Email:				
Are you available to attend orientation August 16 from 6-8:30 pm?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available to attend the midpoint October 4 from 6-8:30 pm?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently in business? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, for how long?			What were your annual sales in 2016?	
If you are not currently in business, when do you plan to start?				
Are you currently employed?				
Provide a brief description of the business you own or plan to start:				
* Referring to the attached self-certification form please check one:				
<input type="checkbox"/> Extremely Low (Program Investment \$30)		<input type="checkbox"/> Low (Program Investment \$50)		
<input type="checkbox"/> Moderate (Program Investment \$85)		<input type="checkbox"/> Above Moderate (Program Investment \$130)		

\*All information in this application including your income is confidential and will not be shared. Proof of income is required for individuals who qualify for the IYT program at reduced cost. Please send copies of the first two pages of your 2016 tax returns or last two paycheck or unemployment check stubs to Kim Scanlan at [kscanlan@cvwbc.org](mailto:kscanlan@cvwbc.org) or by mail to 77806 Flora Road, Suite A, Palm Desert, CA 92211. For qualifying applicants, an application packet will be deemed as incomplete without this information. By submitting this application you are stating that you agree and will comply with all program requirements.

# CDBG Public Service Intake Form

Name:	
Address:	
City:	Zip:
Age:	Date of Birth:

1. Head of Household:            Male             Female
2. Disabled                            Yes             No
3. Number in Household: \_\_\_\_\_
4. List all members of your household, their relationship to you and their age:

Name:	Relationship to you and age:
_____	_____
_____	_____
_____	_____

5. On the line corresponding to your household size, please circle or highlight your annual income level (from all sources):

Household	Extremely-Low Income	Low Income	Moderate Income	Above Moderate
1	<input type="checkbox"/> \$13,550	<input type="checkbox"/> \$22,600	<input type="checkbox"/> \$36,150	<input type="checkbox"/> \$36,151 and up
2	<input type="checkbox"/> \$16,240	<input type="checkbox"/> \$25,800	<input type="checkbox"/> \$41,300	<input type="checkbox"/> \$41,301 and up
3	<input type="checkbox"/> \$20,420	<input type="checkbox"/> \$29,050	<input type="checkbox"/> \$46,450	<input type="checkbox"/> \$46,451 and up
4	<input type="checkbox"/> \$24,600	<input type="checkbox"/> \$32,250	<input type="checkbox"/> \$51,600	<input type="checkbox"/> \$51,601 and up
5	<input type="checkbox"/> \$28,780	<input type="checkbox"/> \$34,850	<input type="checkbox"/> \$55,750	<input type="checkbox"/> \$55,751 and up
6	<input type="checkbox"/> \$32,960	<input type="checkbox"/> \$37,450	<input type="checkbox"/> \$59,900	<input type="checkbox"/> \$59,901 and up
7	<input type="checkbox"/> \$37,140	<input type="checkbox"/> \$40,000	<input type="checkbox"/> \$64,000	<input type="checkbox"/> \$64,001 and up
8	<input type="checkbox"/> \$41,320	<input type="checkbox"/> \$42,600	<input type="checkbox"/> \$68,150	<input type="checkbox"/> \$68,151 and up
<b>Investment</b>	<b>\$30</b>	<b>\$50</b>	<b>\$85</b>	<b>\$130</b>

6. Ethnic Background:             Hispanic     Non-Hispanic

7. Racial Background (Check One):

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

According to Title 18, Section 1001 of the U.S. Code, it is a felony for any person to knowingly and willingly make false or fraudulent statements to any department of the United States Government. I, the undersigned, hereby certify that all statements contained herein, are true and correct to the best of my knowledge and belief. I understand the information I provide in this certification is subject to verification, and I agree to provide necessary documentation if requested to do so.

**Under the penalty of perjury, I certify that the above information is true and correct.**

Applicant Signature:	Date:
Agency's Approval:	Date:

**Essay**

Tell us about your dream of becoming a small business owner. (One page)

[Empty box for writing the essay]