SOUTH PALM BEACH SCORE VETERANS TRAINING AND GRANT PROGRAM APPLICATION WORKSHEET TO THE "PATHWAY TO BUSINESS SUCCESS, INC" FOUNDATION (the "Foundation")

EACH APPLICANT AGREES TO COMPLY WITH THE FOLLOWING CONDITIONS:

The Applicant must provide herein a detailed description of the funding purpose that will support why the Foundation should make a grant to the business or proposed business. Applicant agrees to comply with the following conditions:

1. Complete the Grant Application and provide relevant business information as requested.
2. Provide proof of any equity invested into the specific business by Applicant or others.
3. Provide verification that funds were used in the manner outlined in the application for grant funding whenever requested by foundation personnel. Submit invoices and verification of payment whenever asked and within 14 days of such a request.
4. To reimburse the Foundation for any funds not utilized as outlined in the use of funds or, at the sole discretion of the Foundation, 30 days following the date when written notice is given by the Foundation to the grantee that the grant funds were not properly utilized by the grantee (the "Foundation Notice"), the grant shall revert to a loan made by the Foundation to the grantee, bearing interest at 10% above the Wall Street Libor rate with principal and interest to be paid monthly in accordance with an amortization schedule set forth in the Foundation Notice. The Term of any such loan will be not less than 5 years nor greater than ten years.
5. To complete quarterly evaluation-monitoring reports – one at the end of the funding process and on a quarterly basis thereafter. All such reports must be reviewed and signed off by Applicant's SCORE counselor. SCORE's sole role is to act as the Applicant's technical advisor.
6. That for promotional purposes the Foundation may release Applicant's name, business name, location and project funded.
7. To provide a DD214—to prove Applicant's condition of discharge.
8. To provide a copy of Applicant's Social Security Card.
9. To provide a copy of Applicant's Government Photo ID (state ID, Service ID, driver's license, passport etc.)

GRANT FUNDING:

The Business Assistance grant is designed to assist Iraq/Afghanistan veterans who served in theatre and their immediate family members start, grow and prosper in a business of their own. The grant provides qualifying businesses with assistance to cover

costs associated with improving business operations or to assist a start-up. **This grant will only be awarded once to any business, its affiliates or owners.** Examples of uses that can be paid for with the grants are: creating new jobs, business consulting services, marketing plans, working capital to bridge financial crisis or contract and business systems upgrades, public relations, marketing plans, business plans and any other service or product that in the opinion of the grantee's SCORE counselors will assist in the creation or growth of a business.

GRANT FUNDING CRITERIA:

While the merits of each investment grant will vary, the Foundation will evaluate projects according to the following eligibility criteria:

1. The character of the veteran as displayed both at a series of interviews, indications of references and his/her standing in their relative service before and after discharge. Those with a dishonorable or general discharge for any reason will automatically be rejected. Only those with an Honorable discharge as defined by the Military code of Justice will be considered for a grant.

2. Personal Statement - While the merits of each grant award will vary, funding requests should include a statement by the Applicant demonstrating how funding this business will provide employment to individuals within the state of Florida, stimulate economic growth, expand local business opportunities and other benefits to the community as indicated by the Applicant.

3. Type and Location of Business– The Foundation will make grant investments in small Iraq/Afghanistan veteran owned businesses located in Palm Beach County. To be considered for eligibility the business must be an existing business, or a start-up registered in the State of Florida and domiciled in Palm Beach County.
4. Economic Impact- The impact of the proposed venture based on the number of jobs created or retained, the quality of jobs created, infrastructure created and other characteristics that provide growth in the local economy may be considered.
5. Management Experience– The Foundation wants to provide grants to passionate, committed and experienced veteran entrepreneurs and management teams with a track record of proven leadership in the company's specific industry, in prior entrepreneurial ventures or who have demonstrated a clear role of leadership, innovation, discipline and thinking outside the box in performing their military service.
6. Owner Investment in Project– The owner of the company must have invested time and/or capital into the business venture.
7. Use of funds – The proceeds must be used for the specific purpose outlined in the application for funding. Proceeds may be utilized for a variety of uses including, but not limited to, start-up expenses for a new business, acquiring a

profitable business, funding business growth or expansion or developing technology or any other use determined by the SCORE counselors as beneficial to the development of the business.

8. The business must be owned 51% or greater by a qualified Iraq/Afghanistan veteran(s) who has served this country and/or an immediate family member of such veteran(s) but only if the Veteran is deceased or severely disabled. This owner must be able to demonstrate that they have experience specifically related to the business' main product, service or industry. This owner must also be involved in the day to day business operations and must have the responsibility and authority to act on behalf of the business.

Full Name:_____
(First) (Middle) (Last)
Social Security Number:_____
Present Home Address:
_____
_____
_____
_____
If living at present address less than 3 years please provide other residences on a separate sheet.
Citizenship Type:_____

Date of birth:_____
Health:_____
Highest Security Clearance Held:_____
E-mail address:_____
Telephone (home): (work):_____
Fax Number:_____
Date of Service Entry:_____
Branch of Service:_____
Service I.D. Number:_____
Rank or Specialty:_____
VA Rated Disabled:_____yes_____No. If yes explain below or on a separate
sheet._____
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Location of VA Office where you are
registered:_____
Do you receive any benefits:_____Yes_____No: If yes please explain.

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NOTE: Make a separate entry for each assignment.
Start with your most recent job and work back. Unpaid positions can be considered work experience. If employed prior or during your service indicate as such below.

1. Job title:_____
Department:_____
Dates: from to_____
Salary: starting, ending_____
Description of duties, tasks and
accomplishments:_____
_____
_____
_____
_____

Honors/awards:_____
Special courses taken (seminars, workshops, training
programs):_____
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What did you dislike about this
job?_____
_____

What did you like about this
job?_____
_____

2. Job title:_____
Department:_____
Dates: from to_____
Salary: starting, ending_____
Description of duties, tasks and
accomplishments:_____
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Honors/awards:_____
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Special courses taken (seminars, workshops, training
programs):_____
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What did you dislike about this
job?_____
_____

What did you like about this
job?_____
_____

3. Job Title:_____
Department:_____
Dates: from to_____
Salary: starting ending_____
Description of duties, tasks and
accomplishments:_____
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Honors/awards:_____
Special courses taken (seminars, workshops, training
programs):_____
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_____
What did you dislike about this
job?_____
_____

What did you like about this
job?_____
_____

NOTE: Use additional pages as needed.

High School
Name and address:_____
_____
Year graduated or number of years completed:_____
Honors/awards/accomplishments:_____
_____
Clubs/organizations (offices held, duties, accomplishments):_____
_____
_____

Colleges Attended
Names and addresses of colleges or universities attended:_____
_____
Year graduated or number of years completed:_____
Degrees/certificates earned:_____
Degree major:_____
Degree minor(s):_____
Honors/awards/accomplishments:_____
_____
Clubs/organizations/activities (offices held, duties, accomplishments, etc.):_____
_____

Graduate Education
Name and address of educational institution:_____
Year graduated or number of years completed:_____
Degrees, Certificates, Licenses earned:_____
Degree major:_____
Degree minor(s):_____
Honors/awards/accomplishments:_____
_____
Clubs/organizations/activities (list offices held, duties and accomplishments):_____
_____

Training (professional, technical, clerical, management, license, certificate, etc., training programs, include Military training.)

NOTE: Make a separate entry for each training program that you completed.
1. Name and address of educational or technical institute or location of training:
Course(s) attended:

Description of course(s):

Date attended:
Hours/credits completed:
Certificate/license earned:
Honors/awards:

2. Name and address or location of training:

Course(s) attended:

Description of course(s):

Date attended:
Hours/credits completed:
Certificate/license earned:
Honors/awards:

3. Name and address or location of training:
Course(s) attended:

Description of course(s):

Date attended:
Hours/credits completed:
Certificate/license earned:
Honors/awards:

Foreign languages/American sign language
Fluent in:
Knowledge of:
Computer Languages
Fluent in:
Knowledgeable of:
Computer Hardware
Expert in:
Knowledge of:

Computer Software
Expert of:
Knowledge of:
Machines/Equipment
Operate:
Repair:
Clerical Skills:
Other:

Hobbies/interests:

Memberships in organizations:

Offices held/duties/accomplishments:

Volunteer/community activities (duties and accomplishments):

Married:____Yes____How Long____No

Divorced:____Yes____How Long

Children:_____Yes_____Ages___No

Is spouse on board with your business plans_____Yes_____No

Are you considered a minority_____yes_____No, If yes what minority segment_____

THE BUSINESS CONCEPT

Explain the business concept, marketing concept, competitors, cash requirements etc(attach a business plan if you have one)_____
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FINANCIAL INFORMATION

Should you be considered by the Foundation for any funding you will be required to submit a detailed personal financial statement and business financials if applicable. The award of a grant is solely at the discretion of the board of directors of the Foundation. SCORE chapter 412 advises you, works with you, helps you with your business plan and counsels you on business matters. SCORE plays no part whatsoever in the final decision as to who receives or does not receive a grant from the Foundation. In signing and submitting this application the Applicant is acknowledging this fact.

What is your net financial worth(Include all real estate, bonds, stocks, cast funds etc minus all that you owe)_____

How liquid are you? List the total of all cash and cash like instruments_____

How much cash are you going to use of your own money for the business_____

How much cash have you borrowed from other sources to start the business_____

Have others invested money in your business? If yes how much_____

What are they getting for their investment(Explain)_____
_____
_____
_____
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_____
_____
_____(attach any agreements you have with investors)

Credit Score:_____
_____
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_____
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Indicate above and explain any adverse items on your credit reports. Use additional sheets if required. Attach copies of your most recent credit reports from all three credit reporting agencies.

List all Credit Cards:_____
_____
_____
_____
_____
_____

Highest Monthly Amount Charged_____

Current Balances:_____

List Past or Present Litigations you were involved in and Explain_____
_____
_____

List Liens and Judgments filed against you or a spouse and explain_____
_____
_____
_____

I hereby wish to apply for the Veteran's Grant program as administered by the private foundation called "Pathway to Business Success, Inc" No one has guaranteed me or promised me any grant. I understand that the determination of a grant is solely at the discretion of the foundation. I further understand that SCORE has no say as to if I get a grant or do not get a grant and that SCORE is not in any way connected to the foundation. SCORE and the foundation will make every effort to keep all information in this application confidential. I authorize the foundation to use whatever means to verify the information I have provided in this application.

Applicant's signature_____

Date_____

Mail Application to:

Hal Finkelstein, Chairman
South Palm Beach SCORE
STE 201
Boca Raton, Fl. 33487
Phone: 561 981 5180
Email: hal.finkelstein@scorevolunteer.org

APPENDIX A

Translate Your Military Experience into Civilian Terms

As you create your application, avoid military jargon and military terms. Most civilians will not understand military jargon, abbreviations and acronyms. Therefore, use the following guidelines to prevent this problem:

• Write out terms and, when necessary, explain what they mean.
• For specialized military training, list the names and number of hours of professional and technical training you have taken. Only include training if it relates to the business you seek to start or grow.
• Briefly explain any course that may be pertinent to your business experience. For example, write, “Management and Supervision” as a course title. Then add the course content: equal opportunity law; giving and receiving positive and negative feedback; and giving directions etc.
• Use civilian equivalent phrases and titles. Civilian reviewers may not take the time to translate your military experience into civilian terms, and therefore may not see you as a qualified business owner or start-up candidate. Below are some military terms with recommended civilian equivalents as referenced by the VA.

Military Terms	Civilian Equivalent
NCOIC	Supervisor, Manager, Coordinator
TDY/TAD	Business Related Travel
PCS	Relocation
NCO Academy	Leadership or Management Training
War College	Executive Military Leadership School
Command and Staff College	Senior Military Leadership School
Basic Officers Course	Entry Level Officer Leadership Course
Basic Training	Introductory Military Training
O7 and above	President, Senior Director, Chairman of the Board, Managing Director
O5 and O6	Chief Executive Officer, Chief Operating Officer, Program Director
O4	Senior Administrator, Department Head, Program Manager
O1 to O3	Executive, Administrator, Manager, Project Officer

WO1 to WO5 .....Director, Specialist, Facilitator, Technical Manager, Technical Specialist

E7 to E9.....Director, Supervisor, Department Manager, Operations Manager, Senior Advisor

E4 to E6.....Assistant Manager, Line Supervisor, Section Leader, Task Leader, Supervisor, Foreman

E1 to E3.....Production Worker, Assembler, Technician, Assistant, Apprentice, Team Member