



Connecticut Community Investment Corporation

Request for Counseling and Loan Pre-Screening

To be completed by each individual receiving business counseling/technical assistance from CTCIC

1. Your Name (First, Middle, Last)		2. Telephone Number(s) Home _____ Cell _____		
3. Email Address		City _____ State _____ Zip _____		
4. Street Address (Residence)		City _____ State _____ Zip _____		
5. Race (mark one or more): <input type="checkbox"/> African American (Non-Hispanic) <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic		<input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White (Non-Hispanic) <input type="checkbox"/> Other: _____		6. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
8. Do you consider yourself a person with a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No		9. Veteran Status: <input type="checkbox"/> Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Non-Veteran		7. Within the last two years, have you ever received? <input type="checkbox"/> Aid to Families with Dependent Children (AFDC) <input type="checkbox"/> Temporary Assistance to Needy Families (TANF)
11. How did you hear of us? <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Television <input type="checkbox"/> SBA <input type="checkbox"/> SCORE <input type="checkbox"/> CT-SBDC <input type="checkbox"/> Internet		<input type="checkbox"/> Business Magazine _____ <input type="checkbox"/> Newspapers _____ <input type="checkbox"/> Chamber of Commerce _____ <input type="checkbox"/> Bank _____ <input type="checkbox"/> Other _____		10. Military Status: <input type="checkbox"/> Military Reserve or National Guard <input type="checkbox"/> On Active Duty
15. Name of Company:		12. Are you currently in Business? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip to 21)		
17. Do you conduct business online? <input type="checkbox"/> Yes <input type="checkbox"/> No		13. Month & Year Started:		
19. What is the legal entity of your business? <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> S-Corporation <input type="checkbox"/> LLC		14. Total Number of Employees: Full Time _____ Part Time _____		
16. Type of Business:		15. Name of Company:		
18. Is this a home based business? <input type="checkbox"/> Yes <input type="checkbox"/> No		16. Type of Business:		
20. Do you intend to apply to CTCIC for a business loan? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Undecided (If no or undecided, skip to end)		17. Do you conduct business online? <input type="checkbox"/> Yes <input type="checkbox"/> No		
21. What is the nature of counseling you are seeking? <input type="checkbox"/> Start-up Assistance (How do I start a small business?) <input type="checkbox"/> Business Plan <input type="checkbox"/> Financing/Capital (such as applying for a loan, building equity capital) <input type="checkbox"/> Customer Relations <input type="checkbox"/> Business Accounting/Budget <input type="checkbox"/> Cash Flow Management <input type="checkbox"/> International Trade		<input type="checkbox"/> Managing a Business/Managing Employees <input type="checkbox"/> Marketing/Sales (promotion, market research, pricing, etc.) <input type="checkbox"/> Government Contracting (including certifications) <input type="checkbox"/> Franchising <input type="checkbox"/> Buy/Sell Business <input type="checkbox"/> Technology/Computers <input type="checkbox"/> Legal Issues (such as, Should I incorporate?) <input type="checkbox"/> eCommerce (using the Internet to do business)		
22. Do you authorize CTCIC to obtain your credit history for purposes of pre-screening your loan request? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, provide social security number below (Each individual seeking Business Counseling/Technical Assistance must complete).</i>				
SSN _____ - _____ - _____				
<p>The undersigned, individually and on behalf of the business, hereby requests business management counseling and technical assistance from the Connecticut Community Investment Corporation ("CTCIC") in connection with CTCIC's loan programs. The undersigned acknowledges that CTCIC does not require the undersigned to follow advice given to the undersigned pursuant to this request and that following such advice is not a condition of obtaining a loan from CTCIC. Nothing in this paragraph, however, is intended to relieve the undersigned of the obligation to follow all conditions imposed by CTCIC in connection with any financing through CTCIC, including the terms and conditions of commitment letters and closing documents.</p> <p>In consideration of CTCIC furnishing management, counseling and/or technical or other assistance to the undersigned, the undersigned hereby waives any and all current and future claims or causes of action whatsoever against CTCIC, its directors, officers, employees, agents, contractors and volunteers, arising from any advice, service or other assistance provided to the undersigned, their employees and/or agents in connection with the undersigned's participation (pre-approval through loan payoff) in the CTCIC loan programs..</p> <p>Further, the undersigned authorizes CTCIC to release certain general business, demographic and other information to the SBA or other relevant funding source to evaluate CTCIC's assistance and loan services. In the event the undersigned becomes a CTCIC borrower, the undersigned authorizes CTCIC to use the business and the project financed in its advertising and promotions. Nothing in this paragraph, however, authorizes CTCIC to release personal or business financial information or other information generally deemed proprietary or confidential.</p>				
Signature: _____			Date: _____	