

Entrepreneurial Training Initiative (ETI)

A Program of UCEDC in Partnership with the New Jersey Economic Development Authority (EDA)

1085 Morris Avenue, Union, NJ 07083

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ETI Registration Form

ETI-I REGISTRATION FEE - \$145
Candidate must complete *free* Self-Assessment Tool
available at www.ucedc.com and bring to class.

ETI-II REGISTRATION FEE - \$295
Candidate must complete ETI-I or submit a
Business Readiness Roadmap. Call 908-527-1166

All Registration fees are non-refundable and include text, materials & resources.
High School or GED Certificate is required for at least one partner.

ENCLOSE FULL PAYMENT: Check Money Order - *Make payable to "UCEDC"*
(CREDIT CARDS [MasterCard / VISA] ACCEPTED WITH ON-LINE REGISTRATION ONLY)

TYPE OR PRINT CLEARLY - COMPLETE ALL INFORMATION

CLASS LOCATION: _____

MR./MS. (Circle one) STUDENT NAME: _____

STREET: _____ CITY: _____ STATE: _____

ZIP: _____ COUNTY: _____

DAYTIME PHONE (8:30am-5:00pm): _____ HOME PHONE: _____

FAX: _____ E-MAIL: _____

NAME(S) OF BUSINESS PARTNER(S) if any: _____ Registered for ETI Not Registered
_____ Registered for ETI Not Registered

Limited to two partners per business. Each partner is required to complete a registration form and pay a registration fee.

1. How did you hear about the program? (Circle one)

Newspaper Radio TV Banker Friend ETI graduate/attendee Internet UCEDC/EDA Event Other _____

2. Why are you taking this course (check all that apply)?

- To decide if entrepreneurship is for me To determine if my business idea is feasible
 To help me run my new business To gain funding for my business
 To research expansion of the business To research a different business idea
 Other _____

3. Have you operated a business in the past? Yes No

4. For existing businesses: Startup -12 months or less Existing - for more than one year

a) How long have you owned it? _____ years b) What are your annual sales? (Optional) _____

c) Name of Business/NFP Organization: _____ Business Location (City): _____

d) Including yourself, how many employees do you have? _____ Full-Time _____ Part-Time

e) Business Description: _____

f) Are you certified with the NJ Commerce Commission as a Minority Owned Business? Women Owned Business?
 Registered as a Small Business?

5. Personal Information (information for cumulative statistical purposes only):

a) Highest level of education completed: GED High School 2-Year College 4-Year College Graduate School

b) Experience in your startup or existing business field: _____ years

ETI Staff Only: ETI-I: Paid/Check # _____ Database _____ BRR Completed _____ Date _____ Green Yellow Red ETI-II: Paid/Check# _____ Database _____