

To Submit Application Electronically: **SAVE**
completed document to your computer and
e-mail to cie@wne.edu as an attachment.
Application may also be faxed to
413-796-2119 or mailed to:
Small Business Legal Clinic
1215 Wilbraham Road
Springfield, MA 01119

APPLICATION FOR SMALL BUSINESS LEGAL CLINIC

The Small Business Legal Clinic is primarily focused on providing legal services to entrepreneurs who cannot afford the cost of a lawyer at this point in their business development. Failure to include information can limit the Center's ability to provide services.

Business Owner/Enterprise

Please describe your business product or services.

Company Name: _____ Target Market: _____

Salutation: _____ First Name: _____ Last Name: _____

Personal Address: _____ City: _____ State: _____ Zip: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____ Fax: _____

E-mail Address: _____ Web Address: _____

Would you like to be included on our e-mail list & mailing list? Yes No

How did you hear about the Small Business Legal Clinic? _____

Have you previously received support from the Small Business Legal Clinic? Yes No

Have you received any legal assistance regarding this matter? Yes No

If yes, by whom? _____

Business Enterprise Information

Date business opened/planned to open: _____ Number of employees (not including owners): _____

Annual Business Revenue: Less than \$10,000 \$10,000 to \$25,000 \$25,000 to \$50,000 Over \$50,000

Household Income: Under \$25,000 \$25,000 to \$50,000 \$50,000 to \$75,000 Over \$75,000

Legal Structure: Sole Proprietorship Limited Liability Company Corporation
 Partnership Non-Profit Joint Venture

Have you received financing for this project? _____

Sources of financial support: _____

How can the Clinic support you? (Please check below all that apply.)

Please note that the Small Business Legal Clinic does not provide assistance with matters relating to litigation (including collections) or patent law. Additionally, while the Clinic will assist non-profits with operational legal needs, it generally does not assist with forming new non-profit entities.

- | | |
|--|--|
| <input type="checkbox"/> Entity Choice | <input type="checkbox"/> Trademark (availability search, state/federal registration) |
| <input type="radio"/> Sole proprietorship v. LLC v. Partnership v. Corporation | <input type="checkbox"/> Copyright |
| <input type="radio"/> Preparing a Partnership or Operating Agreement | <input type="checkbox"/> Local/State/Federal Regulatory Compliance |
| <input type="checkbox"/> Employment Issues | <input type="checkbox"/> Web Site Issues |
| <input type="radio"/> Employment Applications | <input type="radio"/> Proper Legal Notifications/Disclaimers |
| <input type="radio"/> Employee Manuals | <input type="checkbox"/> Contracts |
| <input type="radio"/> Independent Contractor versus Employee Designation | <input type="radio"/> Drafting <input type="radio"/> Reviewing |

Please feel free to further explain your legal questions or identify other legal issues that concern you.

Demographic Information

The Center For Innovation & Entrepreneurship keeps a record of applicant information used exclusively for data analysis and grant reporting.

- Race** Asian/Pacific Islander Black/African American Hispanic/Latino
 Native American/Alaskan Native White/Caucasian Other _____
- Age** > 18 18 - 25 26 - 35 36 - 45 46 - 55 56 - 65 > 65
- Education** G.E.D. H.S. Diploma Some College Trade Certification Associate's Degree
 Bachelor's Degree Graduate Degree Type of Degree _____

If there is more than one participant, please complete demographic information for each person on a separate application.

Small Business Legal Clinic services are provided to members of the local small business community who do not have the financial resources to afford professional services. The Clinic will provide legal services that have been reviewed by a Massachusetts licensed attorney.

The Small Business Legal Clinic will select clients based on the needs of the business, the capacity of the Center and the potential learning experience of the students. The Clinic may refer applicants to other professionals, but we do not guarantee the service provided.

These decisions will not be based on race, gender, religion, age, national origin or ethnicity, disability, veteran status, sexual orientation and gender identity or gender expression.

Applicant's Signature

Date _____