



9. Do you or your company possess any specialized education or training? Yes No If Yes, please specify:

10. Is your company currently participating in any other programs as a Mentor or a Protégé? Yes No If Yes, please provide the following information (do not include past participation).

Number of current agreements as a Mentor: _____ Number of current agreements as a Protégé: _____

Provide a brief explanation regarding your company's ability to participate in multiple Mentor-Protégé Agreements:

11. Are you willing to enter into a written agreement with a Mentor or Protégé as applicable specifying the goals and objectives of your potential Mentor-Protégé relationship through the TEAM UP Broward Mentor-Protégé Pilot Program? Yes No

12. Describe your company's goal(s) in becoming a Mentor or Protégé through Broward County (add an attachment if needed):

13. Are you willing to attend mandatory TEAM UP Broward Mentor-Protégé Pilot Program activities? Yes No

14. Have you responded to any Broward County solicitations in the past six months? Yes No If Yes, please specify:

15. Does your company currently have any Broward County contracts? Yes No If Yes, please specify:

16. Do you have difficulties in responding to available procurement opportunities? Yes No If yes, please explain:

17. As evidence of my signature below, and being an owner or authorized representative of the business identified within this document, I understand that participation in the TEAM UP Broward Mentor-Protégé Pilot Program is voluntary and my participation is neither a guarantee of a contract opportunity nor a promise of business. I also understand that the Program's intent is to foster positive long-term business relationships. I, the undersigned, on behalf of the business participating in the TEAM UP Broward Mentor-Protégé Pilot Program, agree that the business and all its employees, officials, and agents shall conduct themselves at all times in accordance with the highest business ethics and appropriate business conduct. I also understand that all information provided on this application is open to public disclosure, and may be posted for public viewing to aid Mentors, Protégés and other interested parties in fostering business relationships and/or to authenticate the TEAM UP Broward Mentor-Protégé Pilot Program.

Printed Name of Applicant (above)

Signature of Applicant

Date