



MISSOURI DEPARTMENT OF TRANSPORTATION
MENTOR/PROTÉGÉ PROGRAM

MENTOR APPLICATION

1. Company Information:

Legal Name: d/b/a (if different): Federal Tax ID:

Business Address: Mailing Address:

Business Phone/Fax: Email Address:

Certification Status: Owner's Name and Title:
(Check all that apply) _____
SBA 8 (a): _____ Expiration date: _____
DBE: _____ Expiration date: _____
Other: _____ (Explain: _____)

Legal Structure of Business:
(Check one)
Corporation: _____ Sole Proprietorship: _____
Partnership: _____ Limited Liability: _____
Other: _____

Does your Company have a Business Plan? (Check one)
Yes: _____ No: _____

If yes, please provide a copy of the business plan.

Your signature certifies that the information supplied on all corresponding pages and attachments is accurate.

Signature _____

Date _____

NOTARY PUBLIC

On this _____ day of _____ 20____ before me appeared
and
who, being duly sworn, did execute the fore-going affidavit, and did state they were properly authorized by the
above-named DBE firm to execute this affidavit, and that they did so as their free act and deed.

Signed
My Commission expires:

Notary Public.

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2. Identify All Owners/Shareholders:

Name	% Ownership	Name	% Ownership
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_____		_____	
_____		_____	
_____		_____	

Date Business Established: Specialties:

Number of Full-time Employees:

Number of Part-time Employees:

Name of Insurance Company: Bonding Company:

(Please attach certificate of insurance) (Please attach proof of bonding, if applicable)

3. Business References:

Please list your major customers for past two years and indicate your role on contract:
(P) Prime contractor; (JV) Joint Venture; (Sub) Subcontractor

Customer Telephone/Contact	Type of Project	Role	Contract Amount	Year
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4. Please Provide Your Annual Gross Receipts for the Last Three Fiscal Years:

Fiscal Year	Annual Gross Receipts
_____	_____
_____	_____
_____	_____

5. Check Categories in which You Would be Willing to Provide Assistance:

_____	Project Management	_____	Estimating
_____	Cost Accounting	_____	Plan Interpretation
_____	Construction Techniques	_____	Other (List)

6. Attach one Development Plan per Mentor/Protégé relationship. (See enclosed Program Guidelines.)

Return the completed application to:

Missouri Department of Transportation
External Civil Rights Division/DBE Supportive Services
Mentor/Protégé Program
1590 Woodlake Drive
Chesterfield, MO 63017

If you have any questions or need additional information, please contact:

Missouri Department of Transportation
External Civil Rights Division/DBE Supportive Services
1590 Woodlake Drive
Chesterfield, MO 63017
(314) 453-1872