



STEP 9 Rhode Island Business Profile

Opportunity to participate in RI STEP grant 2020-2022

The Chafee Center for International Business, in partnership with Rhode Island Commerce, is offering eligible Rhode Island small businesses the opportunity to participate in the **STEP** grant. Bryant University's Chafee Center has been awarded the **STEP** (State Trade Expansion Program) grant, which is a Federal grant administered by the US Small Business Administration (SBA) whose goal is to create economic growth by expanding the state's export trade. Under the grant, the Center offers eligible RI small businesses a variety of services and programs to help new companies become exporters and help existing exporters expand their existing international business into new global markets.

To be eligible to receive financial assistance under the STEP grant, companies are required to complete this brief **Business Profile** and **the SBA Self Representation as a Small Business form**.

Both documents are required in order to prove eligibility to participate in this federal grant.

Company Information:

Company Name: _____

CEO/President: _____

Street: _____

City, State, ZIP: _____

Telephone: _____ Email: _____

Is this company registered as a RI for-profit business?

YES

NO

Is this company based in RI and operating a business entity in RI?

YES

NO

Does this company meet the SBA definition of a small business? (Per 13CFR Part 121)

YES

NO

Has the company been in business for at least one year?

YES

NO

Does the company have sufficient resources to bear the costs associated with exporting, including the costs of packing, shipping, freight forwarder?

YES

NO

Is your company suspended or debarred from any Federal agency?

YES

NO

Please indicate whether you consider your company to be "NTE" or "ME" as defined below:

NTE – New To Export – Your company is new to exporting or has had limited experience exporting.

ME – "Market Expansion" – Your company is an experienced exporter who is looking to expand into new country markets or expand into a new region, new market segment or with a new product line within an existing market.

Company Name:

*****Are the products or services offered by this company of U.S. origin or do they have at least 51% U.S.A. content: YES: NO:**

(STEP funding can only be used to support the export of products and services that meet this requirement.)

Form Completed by and Signed By STEP Primary Contact Person:

(Person signing this form and applying for STEP assistance MUST be an authorized signor for the company. If the person is not an executive of the company, please provide executive authorization providing permission for the person named below to complete this form on behalf of the company.)

Name:		Date:	
Title:		Telephone:	
Email:			

I hereby authorize (name of above person) _____ to prepare this and other documents related to the STEP grant on behalf of (company name) _____ .

Authorized by:

(Name and title – must be authorized company executive)

Signature: _____

For any questions or assistance, please contact Linda Woulfe at the Chafee Center at Bryant University: 401-232-6525 or email: lwoulfe@bryant.edu. Email completed forms, or Fax to 401-232-6416

COMPANY PROFILE: Company Name:

1. Year Company Established: _____

2. Approximate Annual Revenue:

<\$500,000 < \$1M \$1M-\$5M \$5M-\$10M \$10-\$25M >\$25M

Total Annual Sales: \$ _____ Domestic %: _____ International %: _____

3. Number of Employees: Full Time: _____ Part Time: _____ Contract: _____

4. Brief Description of your business activity:

5. NAICS Code: _____

(REQUIRED – form will not be accepted without this information)

6. Please indicate if any of the following apply to your business:

- | | | |
|--|---|--|
| <input type="checkbox"/> Woman Owned | <input type="checkbox"/> Veteran Owned | <input type="checkbox"/> Rural |
| <input type="checkbox"/> Owned by Service-related Disabled Veteran | <input type="checkbox"/> Owned and controlled by socially and economically disadvantaged individual | <input type="checkbox"/> Located in a RI Opportunity Z |

Company Name:

7. Which best describes your type of business:

- Retail Wholesale Construction
 Service Manufacturing Technology
 Supply Chain Other: _____

8. Please indicate the **primary** industries you **sell to**:

- Aerospace Automotive Medical Software/IT
 Defense Jewelry Metal Mfg Textiles
 Energy/
Environmental Chemicals Food/Beverage Other: _____

9. Please provide a full description of your main products or services:

10. Who are your typical customers?

- OEMs Distributors
 Retailers Wholesalers
 Subsidiaries/divisions of own company Service providers
 Consumer End Users (B2C) All of the above
 Other: _____

11. Are you currently exporting your products or services?

- YES NO

12. **If YES:**

A. How long have you been exporting?

- Less than 1 year 1-2 years 2-5 years Over 5 years

B. Please list current export markets and % of total sales to each region:

Country	% of Total Sales
_____	_____ %
_____	_____ %
_____	_____ %

13. Are you actively attempting to market your products overseas?

- YES No

14. Does your company currently have an export marketing plan?

- YES No

Company Name:

15. Please briefly describe your company's current export strategy: ***(REQUIRED) If your company does not have a strategy, assistance will be provided to help create a strategy to support STEP funding.***

16. Do you feel your company has a good understanding of what it takes to export? YES NO

17. Please indicate what type of assistance would be most beneficial to you to support your international efforts (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Basic Training on how to export | <input type="checkbox"/> Identifying trade leads |
| <input type="checkbox"/> Information on Foreign Markets | <input type="checkbox"/> Other Federal Assistance programs |
| <input type="checkbox"/> Export Compliance Training | <input type="checkbox"/> Export financing opportunities |
| <input type="checkbox"/> Export Strategy Planning | <input type="checkbox"/> Information on Trademark/IP protection |
| <input type="checkbox"/> Help researching potential customers | <input type="checkbox"/> Trade Show Assistance |
| <input type="checkbox"/> Participation in Trade Missions | <input type="checkbox"/> Website and collateral translations |
| <input type="checkbox"/> Other: | |

The U.S. Small Business Administration (SBA) would like to give eligible small business concerns the opportunity to expand your knowledge and resources of other export programs that are offered by the agency and other federal agencies. Please check the appropriate box if you would like your company's name and contact information to be shared with other relevant agencies to learn more about federal export programs. Your choice to participate or not will not change the status of your participation with STEP. SBA's aim is strictly to share information about other opportunities with you.

YES NO

Please indicate if you give permission to the Chafee Center to share your name and contact information with Rhode Island Commerce as a participant in the RI STEP grant.

- | | |
|--|--|
| <input type="checkbox"/> YES, you may share our company name and contact information with RI Commerce as a STEP grant participant. | <input type="checkbox"/> NO, I do not authorize sharing our company name and contact with Rhode Island Commerce as a STEP grant participant. |
|--|--|

I hereby certify that I am an authorized representative of the company indicated below and that all information provided in this document, as well as any accompanying documents, are true and complete to the best of my knowledge.

Signature (FORM MUST BE SIGNED!)

Name / Title: **(Must be signed by an authorized company executive)**

Company Name : _____

Date: _____

***Please fax all pages to (401)232-6416 or email to: Lwoulfe@bryant.edu
For assistance, call Linda Woulfe at The Chafee Center at 401-232-6525***