DBA’s Incubator Without Walls has provided mentoring, marketing, networking, and small business assistance to over 360 Washington and Hancock county micro-entrepreneurs. IWW is funded through a grant from the U.S. Department of Health and Human Services Administration for Children & Families Office of Community Services.

What tools does IWW provide to business owners?

- Assistance building a viable business plan
- Opportunities to network, mentor, and develop powerful business relationships with other entrepreneurs – once you take a series you’re always eligible for future programs and projects.
- Access to local, state, and federal resources
- Business management training
- Financing and cash flow training
- Marketing and advertising assistance
- Regional training programs
- Financial and loan packaging assistance.

What can IWW do for my business?

As an IWW member you’ll learn how to:

- Improve your management skills and business knowledge
- Gain new customers through careful marketing analysis
- Identify new markets and opportunities
- Increase sales and reduce your expenses, thus increasing profits
- Hire and retain quality employees
- Open pathways to local, state, and federal small business resources
What is expected of me as an IWW member?
♦ Willingness to grow your business, including adding employees or creating a job for yourself
♦ Attend all IWW meetings
♦ Share your expertise and experience by networking with other business owners
♦ Meet income guidelines
♦ Participate fully in the IWW program

How do I become an IWW member?
Complete an application and provide a brief business outline for your existing or proposed business. If you do not have a business plan, you may complete the business plan worksheet that accompanies the application. Your local Small Business Coordinator is available for assistance.

How much does this class series cost?
Tuition is free but you must apply and pre-register.

Where can I find out more and get an application for IWW membership?

Ellsworth Office
Jeff Ackerman
Small Business Coordinator
207-664-2424 ext.4470
jackerman@whcacap.org

Calais Office
Roland Bechard
Small Business Coordinator
207-214-2192
rbechard@whcacap.org

Ellsworth Office
Sarah Nugent
Director
207-546-7544 ext.4495
snugent@whcacap.org

You can download an IWW membership application, fact sheet, poster, and business planning worksheet from our website:
http://www.downeastbiz.org

Supporting Maine's Small Businesses

Incubator Without Walls
PO Box 1191 Calais, ME 04619
PO Box 280 Milbridge, ME 04658
PO Box 299 Ellsworth, ME 04605
dba@whcacap.org
Incubator Without Walls (IWW) Application

Please tell us about your business

<table>
<thead>
<tr>
<th>Your name</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>The name of your business</td>
<td></td>
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<tr>
<td>The business physical address</td>
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<tr>
<td>The business postal mailing address</td>
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<tr>
<td>Other mailing address</td>
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<tr>
<td>The business email address</td>
<td></td>
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<tr>
<td>The business phone number</td>
<td></td>
</tr>
<tr>
<td>The business fax number</td>
<td></td>
</tr>
<tr>
<td>Your business web site</td>
<td></td>
</tr>
</tbody>
</table>

Your business social networking site

<table>
<thead>
<tr>
<th>How long have you been in business?</th>
<th>□ Over 3 years (Mature) □ 1-3 years (Emerging) □ &lt;1 year (Underway)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under what business form do you operate?</td>
<td>□ Sole proprietor □ Partnership □ Corporation (LLC, S-corp, B-corp, etc.) □ Co-operative □ Non-profit</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business net income:*</th>
<th>Household annual income:*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Including yourself, how many employees does your business currently support?</td>
<td>□ FT/benefits □ FT □ PT seasonal □ PT year round □ PT as needed</td>
</tr>
</tbody>
</table>

| Do you anticipate a need to hire in the next 18 months? | □ Yes □ FT/benefits □ FT □ No □ PT seasonal □ PT year round □ PT as needed |

What may prevent you from hiring?

*Why we ask:* Incubator Without Walls measures program success, in part, by changes in business and household income. Your information is maintained as confidential and is never individually identifiable in our reporting.
Incubator Without Walls (IWW) Application (continued)

Please tell us about your business service or product

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please tell us about your goals for this class

During this IWW series you'll focus on several aspects of your business.
You'll be able to get help from your instructor, from your fellow IWWers, and from other resources.

• Please tell us what three things you'd like to work on during this class series.
• Please tell us how meeting these goals will impact your business.
Incubator Without Walls (IWW) Application (continued)

Please read the paragraph below and sign your application. All owners, officers, or partners must also sign. You may attach additional signature pages as necessary.

- The information provided in this application is accurate to the best of my knowledge.
- I understand that personal and/or business information may be requested of me pursuant to this application and I give my consent for such information to be provided. I agree to provide financial and other information necessary to measure the success of the series.
- I understand that WHCA retains the sole decision as to whether I am approved for membership into this IWW series.
- I understand that if I am accepted, I will be required to sign a formal agreement between WHCA and me.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed name</td>
<td>Printed name</td>
</tr>
<tr>
<td>Date</td>
<td>Date</td>
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</tbody>
</table>

Small Business Coordinator

<table>
<thead>
<tr>
<th>Please attach to your completed application:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- your Incubator Without Walls Information Sheet</td>
</tr>
<tr>
<td>- a copy of your business plan if you have one</td>
</tr>
<tr>
<td>- a copy of your marketing plan if you have one</td>
</tr>
<tr>
<td>- brochure, business card, rack card, and other marketing collateral in use</td>
</tr>
</tbody>
</table>

In Washington County return your application to: In Hancock County return your application to:

**Roland Bechard**
Small Business Coordinator
Down East Business Alliance
PO Box 1191
Calais, ME 04619

**Office Location**
Washington County Community College
1 College Drive
Calais, ME 04619
O: 214-2192
E: rbechard@whcacap.org

**Jeff Ackerman**
Small Business Coordinator
Down East Business Alliance
PO Box 299
Ellsworth, Maine 04605

**Office Location**
248 Bucksport Road
Ellsworth, ME 04605
O: 664-2424 ext. 4470
E: jackerman@whcacap.org

A Division of the Washington-Hancock Community Agency