

Business Structure (check one)

Corporation Partnership Sole Proprietor Other _____

Business Enterprise Certification (check all that apply)

Small Business (SBE) Woman Business (WBE) Minority Business (MBE) Disabled Business (DBE)

Provide us with up to 4 keywords to describe your business:

Provide a short description of your business (limit 250 characters):

STATEMENT OF INTENT:

Please attach a 250-500 word statement on why you are applying to the PEAK Leadership Academy and what you hope to gain from your participation.

I attest that, to the best of my knowledge, all of the above and attached/enclosed information is current and accurate.

Print Name

Signature

Date

TO APPLY, SUBMIT:

- ❖ A completed program application
- ❖ A \$150 non-refundable deposit (will be applied toward program fee at acceptance)
- ❖ A 250-500 word statement on why you are applying to the program and what you hope to gain from your participation
- ❖ Other relevant information on your company: including your bio, press kit, marketing materials, annual report, etc.

Submit completed application packet **no later than April 30, 2008** to:

PEAK Leadership Academy
c/o NAWBO-LA
900 Wilshire Blvd., Suite 404
Los Angeles, CA 90017
Phone: 213.622.3200
Fax: 213.622.6659
PEAK@nawbola.org