

MDE SCHOLARSHIP APPLICATION

Name _____

Title _____

Company _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Fax** _____

Email _____ **Website** _____

Year Established _____ **Annual Revenue** _____

Number of Employees _____ **% of Ownership** _____

Business Certification (if any) _____

Industry _____ **NAICS Codes** _____

Business Scope Local State National International
Business Structure Sole Proprietor Partnership Corporation

Describe your business (word limit=25) _____

**** OPTIONAL ****

Highest Education Level High School Community College Undergraduate
 Post Graduate Doctorate

Ethnicity Asian/Pacific Islander Black/African American Latino/Hispanic
 Caucasian American Indian

Age Range 25 or younger 26-40 41-55
 56-65 65 or older

SCHOLARSHIP APPLICATION:

- Complete Enterprise Institute Scholarship Application
- Complete the online UCLA Anderson MDE Program Application: www.anderson.ucla.edu/x20090.xml
- Enclose a 1/2 page personal statement indicating why you are applying and what you hope to
- Include any relevant information about yourself and/or company (bio, promotional materials, etc.)
- Deliver two (2) copies of the completed application packet to:

Enterprise Institute of NAWBO-LA
c/o Scholarship Committee
900 Wilshire Boulevard, Suite 404
Los Angeles, CA 90017