Application: Pro Bono for Economic Equity

SAP Pro Bono for Economic Equity

Thank you for your interest in SAP’s Pro Bono for Economic Equity! The following application will ask you to answer questions about the following areas:

- Basic information about your business, target markets, and community of customers;
- Your employment figures & high-level financials from 2019 & 2020;
- A review of how the pandemic and associated restrictions have affected your business and how you may have adapted;
- The area of support that your business would most benefit from if selected for the Pro Bono for Economic Equity program.

To apply, your business must be:

- A Black-owned small business or social enterprise (as defined by 51% or more Black ownership of the business)
- You must have between 3-50 employees (including yourself, all full or part-time employees, and independent (1099) contractors)
- The business must also NOT be part of a large franchise brand. The business may have multiple locations, but the parent company should be the one to apply for this program.
- The business must have been founded within the United States and have a majority of its operations within the United States.

Selected businesses will also need to:

- Work with PYXERA Global to identify the challenge that will be assessed by the SAP employees and create a detailed project brief to guide their initial work.
- Establish a project coordinator that will be able to dedicate 3-5 hours per week to meeting with the SAP employees or providing the necessary materials to inform their work.
- Ensure periodic access to the business’ decision makers to confirm the validity and sustainability of recommendations.

SAP & PYXERA Global reserve the right to make a final determination on the organization selection process based on the needs of the program and the availability of relevant employee skill sets for project assistance.

Please contact EconomicEquity@pyxeraglobal.org with any questions about the program or application.
Applicant Contact Information

- First & Last Name (1) ________________________________________________
- Primary Telephone Number (2) _______________________________________
- Email Address (3) ________________________________________________
- Job Title (4) _____________________________________________________

Are you the business owner?

- Yes (1)
- No (2)

If you are not the owner of the business, please provide their name and email address.

- Business Owner Name (1) ____________________________________________
- Business Owner Email Address (2) ____________________________________

Business Information

- Name of Business (1) _______________________________________________
- Year Established (2) ________________________________________________
- Business Website (3) _______________________________________________
Business Address

If your business has multiple locations, please provide the address of your headquarters or main location.

- Address (1) ________________________________________________
- Address 2 (2) ________________________________________________
- City (3) ________________________________________________
- State (4) ________________________________________________
- Postal code (5) ________________________________________________

Does your business have more than one location?

- Yes (1)
- No (2)

If yes, please provide the count of individual locations:

____________________________________________________________

Is your business Black-owned?

- Yes (1)
- No (2)

Is your business woman-owned?

- Yes (1)
- No (2)
Is your business veteran-owned?

- Yes (1)
- No (2)
- Unknown (3)

Please provide a description of your business: What are your main products or services? Who are your main customer segments? Does your business have a stated mission or vision?

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What is your relationship to your surrounding community? How would you describe your impact on the community that you serve?

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Does your business have an IRS tax status number (Employer Identification Number)?

- Yes (1)
- No (2)
- Not Applicable (3)
Does your business have a DUNS number?

- Yes (1)
- No (2)
- Not Applicable (3)

Do you have any senior leadership or board members that are government employees or elected government officials?

- Yes (1)
- No (2)
- Need to investigate (3)

Please select the industry in which your business operates (from the following standard options from the North American Industry Classification System (NAICS))

▼ Not Selected (699) ... Other (798)

If you have selected "Other," please specify your industry:

________________________________________________________________

In what state is your business incorporated?

▼ Not Selected (259) ... Not Incorporated (310)
Business Type

☐ Not Selected (1)

☐ Limited Liability Company (LLC) (2)

☐ Partnership (3)

☐ C-Corporation (4)

☐ S-Corp (5)

☐ B-Corp (6)

☐ Public Benefit Corporation (7)

☐ Social Enterprise (8)

☐ Limited Cooperative Association (LCA) (9)

☐ Other (10)

If you have selected “Other,” please specify how your business is registered:

________________________________________________________________________

________________________________________________________________________
Local & Federal Government Certifications (Please select all that apply)
This information will be used by an SAP team when considering potential opportunities for your business.

☐ Not Selected (1)

☐ Certified Business Enterprise (CBE) by DC DSLBD (2)

☐ Disadvantaged Business Enterprise (DBE) by US DOT (3)

☐ Minority Business Enterprise (MBE) by NMSDC (4)

☐ Women-Owned Small Business (WOSB) by SBA (5)

☐ Historically Underutilized Business (HUB) Zone by SBA (6)

☐ SBA 8(a) Certification (7)

☐ Small, Women-owned, and Minority-owned (SWaM) Business by VA SBSD (8)

☐ Local Disadvantaged Business Enterprise (LDBE) by MWAA (9)

☐ Airport Concessions Disadvantaged Business Enterprise (ACDBE) by US DOT (10)

☐ No Certifications (11)

☐ Other: (12)

If you have selected "Other," please specify which certifications your business has:
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How did you hear about the SAP Pro Bono for Economic Equity program?

- [ ] National Minority Supplier Development Council (NMSDC) (1)
- [ ] NMSDC Regional Affiliate (2)
- [ ] Community Development Financial Institution (CDFI) (3)
- [ ] Business Incubator/Accelerator (4)
- [ ] Nonprofit Organization (5)
- [ ] Black Chamber of Commerce (6)
- [ ] Social Enterprise World Forum (SEWF) (7)
- [ ] Government Agency (8)
- [ ] Web search (9)
- [ ] Social media (10)
- [ ] Other: (11)

If you have selected "Other," please specify where you heard about the Pro Bono for Economic Equity program:

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Please provide a count of any full-time employees and contractors, including yourself, if applicable.


Please provide a count of any part-time employees and contractors, including yourself, if applicable.


Annual Revenue

- $1 - $25,000 (1)
- $25,001 - $50,000 (2)
- $50,001 - $100,000 (3)
- $100,001 - $250,000 (4)
- $250,001 - $500,000 (5)
- $500,001 - $1,000,000 (6)
- $1,000,000+ (7)

Please provide an estimate of your profit or loss from 2019.
Do you have an existing business loan?
*This is for information purposes only and will not factor into any consideration of your application.*

- [ ] Yes (1)
- [ ] No (2)

Have you ever been declined for a business loan?
*This is for information purposes only and will not factor into any consideration of your application.*

- [ ] Yes (1)
- [ ] No (2)

Please describe the trajectory of your business in 2019-2020 prior to the COVID-19 pandemic.

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Please provide a description of the effects that the COVID-19 pandemic and any resulting restrictions have had on your business. For example,

- Have you had to lay off or furlough employees?
- Have your operations or supply chain been affected?
- How has your cost of doing business been affected?

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Please describe any changes or pivots you have made in response to the effects of the COVID-19 pandemic and whether those pivots have been successful. Why or why not?

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The following questions will help us determine your immediate need and if the pro bono consulting can support your particular circumstances.

What is your request for support related to?

- The COVID-19 crisis has greatly restricted business activities (1)
- We’re generally unable to support the needs/demand of the clients we serve (2)
- We’re ready to grow/expand but are unsure how to plan for it (3)
- We need help meeting operational needs (4)
- We would like guidance on how to increase operational efficiencies (5)
- We’re short-staffed and need to hire temporary help (6)
- Increasing our resilience for future economic downturns (7)
- Other: (8)

If you have selected “Other,” please specify the area for which you are requesting support:

_________________________________________________________________________________

_________________________________________________________________________________
Business Assistance Requested (Select all that apply)

- Business Start-up (1)
- Strategy & Planning (2)
- Growth Management (3)
- Management Systems (4)
- Project Management (5)
- Accounting Assistance (6)
- Financial Needs Assessment (7)
- Sales & Marketing (8)
- Market Research (9)
- Communications/PR (10)
- E-commerce (11)
- Information Technology (12)
- Supply Chain/Operations (13)
- Human Resources (14)
- Finance/Investments (15)
- Graphic Design (16)
- Consulting (17)
Please elaborate on your needs in 3-5 sentences:

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What do you anticipate will be the impact of the pro bono consulting support if your business is selected?

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