



Center for Economic Vitality

Western Washington University
College of Business and Economics

Client Intake Form

1) Last Name _____ First _____ MI _____

2) Last Name _____ First _____ MI _____

Business Name _____

Mailing Address _____

City _____ Zip _____ Work Phone _____

City Business Located In _____ Outside City Limits Yes No

E-mail _____ Home Phone _____

Web Site _____ Cell Phone _____

Office Use Only

Client # _____

NAICS # _____

Partner Y N

R E A S

Port Location

SME

Export Assistance Client

BS Init _____

Co-Counselor _____

Business Information

Business Type

- Agriculture
- Finance & Insurance
- Wholesale Trade
- Retail Trade
- Transportation/Warehousing
- Professional Services
- Other Services
- Manufacturing
- Health Care
- Construction
- Restaurants
- Real Estate
- Marine Trades
- Technology

Organization

- Sole Proprietor
- C-Corporation
- S-Corporation
- LLC
- Partnership
- Non-Profit
- Undecided

How did you hear about us?:

Banking Institution:

Year Business Started:

Number of Employees:

Gross Sales Last Year:

\$ _____

Brief Business / Product Description: _____

Customer Information

Race/Ethnicity

- White
- Black / African American
- Hispanic / Latino Ethnicity
- Hawaiian / Pacific Islander
- Other
- Asian
- Native American
(please specify Tribe) _____

Gender (Owners)

- Male
 - Female
 - Both
- Exporting? Y N

Veteran Status

- Non-Veteran
- Veteran
- Service-Disabled Vet

Opt In/Out: Periodically, we send out information about events, trainings, upcoming seminars and conferences via email. We operate on the assumption that we have your permission to contact you via email to let you know of these events. With each email you receive, you will have the opportunity to Opt Out of future emailed information from our center.

Client Release

I request business services from the Center for Economic Vitality [CEV] at Western Washington University. I understand that any information received by WWU employees will be held in the strictest confidence by the employee and the CEV to the extent allowable by law, with the exception of general, statistical data collected on services provided, including email addresses and other contact information and general information on my company for verification purposes as required by CEV funders. In addition, to support quality control initiatives, I agree to cooperate should I be selected to participate in surveys designed to evaluate CEV services and impacts. I further understand that by signing the separate addendum **Special Export Assistance Request** I and/or my company will have access to extended services provided by the Jump Start Washington Exports (JustWaEx) program, which are designed to increase my company's international export opportunities. [Please inquire if you have not already been given this Addendum to sign]. Finally, I understand that all employees of the CEV have agreed to not recommend goods or services from sources in which he/she has an interest. In consideration of the CEV furnishing management or technical assistance, I agree to waive all claims against WWU personnel and Western Washington University arising from this assistance.

Signature of Owner / Partner _____ Date _____

Signature of Owner / Partner _____ Date _____



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Addendum Special Export Assistance Request

The Center for Economic Vitality (CEV) provides special export assistance to Washington State businesses, in support of a special initiative by the State of Washington Department of Commerce and the Community Economic Revitalization Board (CERB) to support the growth of Washington State business exports. This special CEV export assistance is called Jump Start Washington Exports (JustWaEx).

By signing this Addendum your business will have access to enhanced CEV services which include technical assistance, export research, matchmaking services, training, and a recognition program.

1) Last Name _____ First _____ MI _____

2) Last Name _____ First _____ MI _____

Business Name _____

Please list the countries to which you are exporting, along with annual export sales: _____

Client Permissions

As (JustWaEx) is a State of Washington funded program, we must provide some information to our funders to verify services provided. As a condition of these special services, we will:

Provide general, statistical updates on our progress in providing services to our funders and referring partners, AND provide email addresses and other contact information and other general information on your company to our grant providers for statistical data collection purposes.

Client Release and Hold Harmless

I request business services from Western Washington University. I agree to cooperate should I be selected to participate in surveys designed to evaluate our services and impacts. I understand that any information received by WWU employees will be held in the strictest confidence by the employee and the CEV, except as permitted above and to the extent allowable by law. I further understand that by signing this "Addendum for Special Export Assistance" I and/or my company will have access to extended services designed to increase our export opportunities.

Finally, I understand that all employees of the CEV have agreed to not recommend goods or services from sources in which he/she has an interest. In consideration of the CEV furnishing management or technical assistance, I agree to waive all claims against WWU personnel and Western Washington University, The State of Washington Department of Commerce, CERB, and its agents, officers, and employees arising from this assistance.

Period of this Agreement

This Agreement remains in effect through December 31, 2015. Clients can extend or renew this Addendum at any time in writing.

Signature of Owner / Partner

Date

Signature of Owner / Partner

Date