



Business Incubator Application

Please complete this application as thoroughly and accurately as possible. When complete, please mail, email or fax to the West Central Nebraska Development District, Inc., Attention: Executive Director. Upon receipt, WCNDD will call to schedule an interview. Additional information may be requested.

Complete all answers

Business Name: _____

Name of Business Owner: _____ Ownership Percentage: _____

Name of Business Owner: _____ Ownership Percentage: _____

Additional Owners: _____ Business Entity: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Alternate Phone: _____

Email: _____ Website: _____

Alternate Email: _____

Mailing Address (if different than above): _____

City: _____ State: _____ Zip: _____

West Central Nebraska Development District, Inc.

333 E. 2nd Street • Ogallala, NE 69153 • Office: 308-284-6077 • Fax: 308-284-6070

www.west-central-nebraska.com

Please answer the questions below in detail. If needed, another sheet of paper can be used.

1. How did you hear about the West Central Nebraska Development District Business Incubator?
2. Briefly describe your business/idea and its current status.
3. Will you be using the incubator as a non-resident or physical office? Please explain.
4. What business assistance do you need from the incubator?
5. Describe your market and where you generate your sales revenue.
6. Describe your company's market advantage.
7. Describe your company's challenges or obstacles.

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8. What are your projections of needed capital over the next five years?

9. Have you completed a product/service analysis to determine demand? If so, what was the outcome?

10. What are your projections for job creation over the next five years?

11. What are your business goals over the next five years?

12. Where do you hope to locate your business three years from now?

13. What is your exit strategy for the business (sale, liquidate, family succession)

In addition, please provide the following:

- Resumes of Management Team and Owner(s)
- Business Plan (if applicable)
- Detailed Summary of Expenses (use form provided)

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Business Incubator Mission Statement

At the West Central Nebraska Development District Business Incubator, it is our mission to create an environment where entrepreneurs can thrive by producing viable, successful companies which provide abundant benefits to the communities for years to come. We are committed to the futures of our entrepreneurs by providing each individual with the training and guidance needed to take an idea to the next level. Our success is measured by the lasting footprint business owners leave on their community by creating jobs, providing community members with a local service or product and educating and empowering their community through their passion and perseverance.

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