

In determining whether a business is eligible for pro-bono legal services through the Ballard Academy for Student Entrepreneurs ("BASE"), we consider the following factors:

- · Household income of the business owner;
- · Revenue of the business, if any;
- · Business owner's access to credit an capital;
- · Applicant's business plan; and
- Benefit that the business will provide to the community.

We will take into consideration extenuating circumstances and special needs when evaluating an applicant's income eligibility (i.e. child care, required educational expenses, special employment expenses, other financial obligations and disability).

APPLICANTS **MUST COMPLETE** ALL PORTIONS OF THE APPLICATION. APPLICATIONS WITH MISSING INFORMATION WILL NOT BE CONSIDERED.

Please submit your completed application by email to **BASE@ballardspahr.com** OR by mail to:

Kimberly W. Klayman Ballard Spahr LLP 1735 Market Street, 51st Floor, Philadelphia, PA 19103





PART ONE: GENERAL INFORMATION

Name (Last, First & Middle Initial):	
Street Address:	Work Phone:
City, State, Zip:	Home Phone:
Email Address:	Mobile Phone:
Alternate Contact Name:	
Alt Phone:	
Is English your first language? Yes N	No
Do you need an interpreter? Yes No	If yes, what language?
Current College or University:	
Prior College Education:	
PART TWO: BUSINESS INFO	DRMATION
(If different from above)	
City, State, Zip:	Business Phone:
Business Email:	Address Website:
Briefly describe your service, application, platfo	orm, or product:*

*If you have a business plan, please attach a copy





PART THREE: ADDITIONAL BUSINESS INFORMATION

If you are currently conducting your business, answer as many of the following questions as you can. If not, skip to Part IV.

1. (1	Please check one.) I intend to conduct business as a:								
	Sole Proprietor S Corp LLC Not Sure								
	Partnership C Corp Other								
ls t	s this business venture being developed as part of a class project? Yes No								
Ple	Please attach copies of any existing formation documents.								
2.	When did you start doing business?								
3.	How many employees do you currently employ or, if independent contractors, how may independent contractors?								
4.	Do have any outstanding leases? Yes No If yes, please submit a copy of the lease.								
5.	Did your business have any revenue last year? Yes No								
	If yes, what was the total amount?								
6.	Is this business venture being developed as part of a class project or in conjunction with a college or university partner? Yes No								
	If yes, please explain.								
7.	Attach a current copy of your balance sheet and profit and loss statement. If it is not clear on your balance sheet and/or profit and loss statement (or if you do not have a balance sheet/profit and loss statement), please list any revenue to date and the costs or expected costs of running your business this year.								





PART FOUR: LEGAL ASSISTANCE

1.	Briefly describe the primary legal issue with which you need assistance, and up to four additional legal issues:				
2.	Have you consulted an attorney concerning any of the above matters? Yes No				
	If yes, please provide the name, address, and telephone number of the attorney consulted.				
	Was the attorney paid? Yes No				
	Why are you not continuing to pursue this matter with the attorney consulted?				
	Have you received any assistance starting your business from an organization? Yes No				
4.	If applicable, please identify the organization or person that referred you to BASE.				
P	ART FIVE: FINANCIAL INFORMATION				
1. C	Dependents (people you support):				
	Number of children:Number of others:				
	(i.e. parents, other relatives) Please explain:				





2.	Employment:					
	Your employer:		Spouse's employe	er, if any:		
3.	Annual Income (Gross):		Total Annual Gros	ss Income:		
4.	Please list your monthly expenses (e.g. childcare, medical, transportation, etc.).					
5.	ness-related.					
6.	Is your business being financed in placed in p					
7.						
8.						
	Name #1:	F-mail:		Total annual gross household income \$		
	Name #1:			Total annual gross		
	Name #3:			Total annual gross household income \$		
9.						
	If you responded yes to the preced contractual arrangement, and/or lead	•	ease identify any o	ther part(y)/(ies) to the legal dispute,		





PART SIX: CERTIFICATION

I hereby certify that all of the information in this application is true to the best of my knowledge. I understand that BASE may use this information in evaluating my eligibility for free legal services.

By signing this form you are agreeing that the information you provided to BASE may be disclosed to attorneys in efforts to recruit pro bono assistance for your business. You also agree that BASE may disclose non-confidential information about your business.

SIGNATURE:		
Digital Signature Acceptable		
DATE:		

