

MENTOR-PROTÉGÉ PROGRAM APPLICATIONOMB Number: 3090-0286
Expires: 7/31/2012

A signed mentor-protégé Application, including the Agreement for each mentor-protégé relationship must be submitted with this application to the Office of Small Business Utilization (OSBU) for approval. Additional information may be provided in narrative form. Submit your application via e-mail to mentorprotege@gsa.gov

1. Mentor Firm Information. (See 519.7010(a)) Provide the following:

NAME OF FIRM	CONTACT NAME	POSITION TITLE
ADDRESS		TELEPHONE NUMBER
FAX NUMBER	E-MAIL ADDRESS	HOME PAGE

2. Protégé Firm Information. (See 519.7010(a)) Provide the following:

NAME OF FIRM	CONTACT NAME	POSITION TITLE
ADDRESS		TELEPHONE NUMBER
FAX NUMBER	E-MAIL ADDRESS	HOME PAGE

3. Current Status of Mentor.

- a. Is a small business (See 519.7006(a)). Is not a small business (See 519.7006(a)).
- b. Is currently performing under at least one active, approved subcontract plan (Small Business is exempt) (See 519.7009(b)(1)).
- c. Is eligible, as of the date of this application, for award of federal contracts (See 519.7006(b)).
- d. Number of Proposed protégé arrangements: _____ (See 519.7009(b)(2))
- e. Data on all current GSA contracts (See 519.7009(b)(3)) and subcontracts (See 519.7009(b)(3)) to include:

PRIME CONTRACT AWARDS

Contract Number and Contract Type	Period of Performance (including options)	Awarding GSA Office and Point of Contact	Contract Value (including options)
			\$
			\$
			\$
			\$
			\$

When applicable, indicate the technical program effort(s) (Program Title), name of GSA Project Manager and/or Contracting Officer's Representative (including contact information)(See 519.7009(b)(3)).

SUBCONTRACT AWARDS (519.7010(f))

Contract Number and Contract Type	Period of Performance (including options)	Awarding GSA Office and Point of Contact	Contract Value (including options)
			\$
			\$
			\$
			\$
			\$

f. Data on total number and dollar value of subcontracts awarded under GSA prime contracts within the last 2 years and number and dollar value of such subcontracts awarded to entities who are proposed protégés (See 519.7009(b)(4)).

g. Information on the proposed types of developmental assistance. For each proposed mentor-protégé relationship include information on the company's ability to provide developmental assistance to the identified protégé firm and how that assistance will potentially increase subcontracting opportunities for the protégé firm, including subcontracting opportunities in industry categories where these entities are not dominant in the company's current subcontractor base (See 519.7009(b)(5)).

4. Eligibility of Protégé (519.7010(b)). Provide a statement certifying that the company is currently eligible pursuant to the following criteria:

(a) Must be a small business, veteran-owned small business, service-disabled veteran-owned small business, HUBZone small business, small socially and economically disadvantaged business, and women-owned small business (See SBA Regulations: 13 CFR 124, 125 and 126 and GSAM 519.7007(a)(1)). The Protégé represents that it is (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Small business concern | <input type="checkbox"/> Small Disadvantaged business concern |
| <input type="checkbox"/> 8(a) small business concern | <input type="checkbox"/> Women-owned small business concern |
| <input type="checkbox"/> Veteran-owned small business concern | <input type="checkbox"/> Service disabled veteran-owned small business concern |
| <input type="checkbox"/> HUBZone small business concern and is on the List of Qualified HUBZone small business concerns maintained by the Small Business Administration | |

(b) Must be small as determined by the requirements of the specific NAICS code. Protégé's primary NAICS code _____ (See 519.7007(a)(2)).

(c) The Protégé represents that it is eligible, as of the date of this application, for award for federal contracts (See 519.7007(d)(3)).

5. Developmental Assistance Program (See 519.7010(c)). Describe the development program for the protégé firm specifying type of assistance planned. Types of developmental assistance a mentor firm can provide to a protégé firm may include:

Management guidance relating to financial management, organizational management, overall business management/planning and/or business development.

Total Subcontract Awards to Protégé

Fiscal Year	Number	Dollar Amount
FY-		\$
FY-		\$

6. Program Participation Term. State the period of time over which the developmental assistance will be performed (See 519.7010(g)).

7. Potential Subcontracts. Provide the anticipated dollar value and type of subcontracts that may be awarded to the protégé firm consistent with the extent and nature of mentor firm's business, and the period of time over which they may be awarded (See 519.7010(f)).

8. Mentor Termination Procedures. Describe the procedures for the mentor firm to notify the protégé firm in writing at 30 days in advance of the mentor firm's intent to voluntarily withdraw its participation in the Program, or to terminate the Agreement (See 519.7010(h)).

9. Protégé Termination From the Program. Describe the procedures for a protégé firm to notify the mentor firm in writing at 30 days in advance of the protégé firm's intent to voluntarily terminate the Mentor-Protégé agreement (See 519.7010(i)).

10. Other Termination Procedures (See 519.7010(j)). Describe below the procedures for the mentor firm to terminate the Mentor-Protégé agreement for cause.

11. Reporting Requirements. Mentor and Protégé agree to comply with 519.7015, Reports.

YES

NO

12. Signed Agreement. Mentors and Protégés are asked to sign and date this agreement. The parties shall state they agree to comply with the obligations in all clauses and provisions governing the program.

Mentor

Protégé

Printed Name

Printed Name

Signature

Signature

Title

Title

Date

Date

Public Burden Statement

Public reporting burden for this collection of information is estimated to average 3 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information for the application and the reporting requirement. The Agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the GSA Office of Small Business Utilization (E), 1800 F Street, NW, Washington, DC 20405.