



## 7(j) Federal Contracting Readiness Program (FCRP) Small Business Initial Assessment Form A

Business Name:

Owner Name:

(Last Name)

(First Name)

Street Address:

City:

State:

Zip:

Phone:

Email:

1. Are you a part of a socially disadvantaged group? No Yes Identify Group
2. At Least Two (2) Years in Business: Yes No Date Established:
3. Three (3) Years Tax Returns: Yes No (Please send business and personal tax returns with **this** Initial Assessment Form)  
Per CFR 124.107 (a) (Business) Income tax returns for each of the two previous tax years must show operating revenues in the primary industry (NAICS Code) in which the applicant is seeking 8(a) BD certification. \*\*Less than two years will place you in Track 1.
4. Current Number of employees (W-2): 1 2 - 4 5 - 10 More than 10
5. What are the current annual sales? \$0.00 - \$199,999 \$200,000 - \$499,999 Over \$500,000
6. What Accounting System do you use?
  - a. Can you generate Financial Statements (Profit & Loss, Balance Sheet, AR-AP Aging)? Yes No
7. Are you registered in System for Award Management (SAMs)? Yes No Here's the link: [SAM.gov | Home](https://sam.gov)
  - a. If yes, please provide: Unique Entity Identifier: Cage Number:
8. Does your firm have a Capability Statement? Yes (Please send with Initial Assessment Form)  
No (Please complete data below)
  - Primary NAICS Code:
  - Secondary NAICS Code(s):
  - Current Small Business Certifications:
  - Business Narrative (A couple of sentences):
9. How did you learn about Ruffin Consulting's Federal Contracting Readiness Program (FCRP)?  
SBA 7(j) Track 3 Webinar Fellow Small Business Other

\*\*\*Your Initial Assessment Form will be evaluated for placement in Track 1 or Track 2 and we will notify you of the next program start date.

\*\*\*Please sign as an acceptance to participant in your assigned FCRP Track

If you have any questions and/or concerns, please feel free to contact our office at 615.528.1110.

**Submit Via Email**