**Information Needed from BEBS Program Participants**

Basic Information

Name of business Click or tap here to enter text.

Business owners Click or tap here to enter text.

Participant name & position Click or tap here to enter text.

Physical address Click or tap here to enter text.

Email address Click or tap here to enter text.

Type of business Click or tap here to enter text.

How did you hear about this program? Click or tap here to enter text.

Employee Information

Number of employees

* Total (including full-time, part-time, seasonal and year round): Click or tap here to enter text.
* Full-time (30 hours or more per week) year round: Click or tap here to enter text.
* Part-time (under 30 hours per week) year round: Click or tap here to enter text.
* Seasonal full-time: Click or tap here to enter text.
* Seasonal part-time: Click or tap here to enter text.

If you have seasonal employees, how many weeks do they typically work?

Click or tap here to enter text.

Do you have an employee handbook? (If so, provide over email with this questionnaire)

Click or tap here to enter text.

Commitment to Program

Please provide an explanation in a few sentences of why you would like to participate in this program, and what you hope to accomplish through participation.

Click or tap here to enter text.

This program requires attendance at 6 trainings, each 1.5-2 hours in length. 5 of the sessions will be remote, and one will be in person in April in the Burlington area. Are you able to commit to make time to attend all training sessions?

Click or tap here to enter text.

The program also involves an in person meeting on site at your business. Is there a particular time of year that is best for your schedule?

Click or tap here to enter text.

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