

CENTER NAME



Primary Consultant: \_\_\_\_\_

### SBDC PROJECT ACTION AGREEMENT

Business: \_\_\_\_\_ Owner: \_\_\_\_\_

Project: \_\_\_\_\_

Expected Completion Date: \_\_\_\_\_

The Small Business Development Center (SBDC) and \_\_\_\_\_ agree to perform the following actions to the best of their abilities in an effort to complete the project above.

Action Step	Responsible Party	Due Date	Completion Date

### Projected Impact

*With the help of the SBDC, the following are the results we plan to achieve:*

- |  |  |
|--|--|
| <input type="checkbox"/> SBA guaranteed loan           | <input type="checkbox"/> Start my business       |
| <input type="checkbox"/> Commercial (bank) loan        | <input type="checkbox"/> Expand/Grow my business |
| <input type="checkbox"/> Owner investment              | <input type="checkbox"/> Hire new employees      |
| <input type="checkbox"/> Venture capital               | <input type="checkbox"/> Keep existing employees |
| <input type="checkbox"/> Prime contracts               | <input type="checkbox"/> Increase annual sales   |
| <input type="checkbox"/> Subcontracts                  | <input type="checkbox"/> Save money              |
| <input type="checkbox"/> Complete a business plan      | <input type="checkbox"/> Save the business       |
| <input type="checkbox"/> Complete feasibility analysis |  |
| <input type="checkbox"/> Improved management ability   |  |
| <input type="checkbox"/> Other: _____                  |  |

Client: \_\_\_\_\_

Date: \_\_\_\_\_

SBDC Advisor: \_\_\_\_\_

Date: \_\_\_\_\_

SBDC Director: \_\_\_\_\_

Date: \_\_\_\_\_

