



DVBE RESOURCE APPLICATION

(REV. 7/1/2007)

Office of Small Business and DVBE Services (OSDS)

707 3rd Street, 1st Floor, Room 1-400

West Sacramento, CA 95605

www.pd.dgs.ca.gov/smbus (916) 375-4940

| FOR STATE USE ONLY | |
|--------------------|--|
| Date Received: | |
| Date Reviewed: | <input type="text"/> |
| Approved: | <input type="checkbox"/> R <input type="checkbox"/> T <input type="checkbox"/> F |

TYPE OR PRINT CLEARLY IN INK. COMPLETE THE APPROPRIATE SECTIONS AND ATTACH SUPPORTING DOCUMENTATION (See Section D).

RESOURCE TYPE (CHECK)

- Trade Trade papers are evaluated in accordance with Public Contract Code, Section 10115.2(b)(3) and California Code of Regulations, Title 2, Section 1896.61(q). Approved trade papers will be listed in the DVBE Resource Guide and on the DGS Website.
- Focus Focus papers are evaluated in accordance with Public Contract Code, Section 10115.2(b)(3) and California Code of Regulations, Title 2, Section 1896.61(m). Approved focus papers will be listed in the DVBE Resource Guide and on the DGS Website.
- Referral Referral Organizations provide services to identify potential DVBE subcontractors.
- Organization

A. CONTACT INFORMATION (All applicants must complete section A.)

| | | | | | |
|--|---------------------------------|-----------------------------------|---------------------------------------|----------------------------|--------------------------|
| ORGANIZATION NAME <input type="text"/> | | | | | |
| Organization Mailing Address (Street or P.O. Box) <input type="text"/> | | | City <input type="text"/> | State <input type="text"/> | Zip <input type="text"/> |
| Phone Number <input type="text"/> | Fax Number <input type="text"/> | Email <input type="text"/> | Internet address <input type="text"/> | | |
| Contact Representative Name <input type="text"/> | Title <input type="text"/> | Phone Number <input type="text"/> | Email <input type="text"/> | | |

B. DVBE TRADE/FOCUS PAPERS (Complete Section B if you are applying for trade, focus and/or both.)

| | |
|---|--|
| Name of Publication: | <input type="text"/> |
| Method of Publication: | <input type="checkbox"/> Hard-Copy <input type="checkbox"/> Electronic Indicate URL <input type="text"/> |
| Does your publication offer: | <input type="checkbox"/> Articles <input type="checkbox"/> Editorials <input type="checkbox"/> News <input type="checkbox"/> Laws & Regulations <input type="checkbox"/> Resources <input type="checkbox"/> Events <input type="checkbox"/> Training |
| Does your publication offer advertisements: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| If yes, indicate the types of contracting advertisements: | <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Federal <input type="checkbox"/> Private <input type="checkbox"/> Prime contractors seeking DVBE subcontractors |
| | <input type="checkbox"/> Prime contractors seeking other types of subcontractors |
| Indicate your service area: | <input type="checkbox"/> Northern CA <input type="checkbox"/> Central CA <input type="checkbox"/> Southern CA <input type="checkbox"/> Bay Area <input type="checkbox"/> Statewide |
| Publication frequency: | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other <input type="text"/> |
| How often is the content updated? | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other <input type="text"/> |
| What is the total circulation per week? | <input type="checkbox"/> less than 500 readers or hits <input type="checkbox"/> 500-1000 readers or hits <input type="checkbox"/> more than 1000 readers or hits |
| How is the publication distributed: | <input type="checkbox"/> Not distributed <input type="checkbox"/> Subscription <input type="checkbox"/> Membership <input type="checkbox"/> Electronically <input type="checkbox"/> Newspaper |
| Indicate the percentage of circulation for each of the following: | Distributed to paid subscribers <input type="checkbox"/> Distributed to publically available lists <input type="checkbox"/> Distributed at Events <input type="checkbox"/> |
| | Distributed to free subscribers <input type="checkbox"/> Distributed to kiosks, racks, businesses <input type="checkbox"/> |
| | Distributed to organization subscribers <input type="checkbox"/> Other <input type="text"/> |
| How do you reach new readers? | <input type="text"/> |
| Do you charge a subscription fee? | <input type="checkbox"/> No fee <input type="checkbox"/> Yes, indicate amount <input type="text"/> |

Please complete for **Trade Paper** consideration (Documentation to support your answers is required under Section D):

*A full application is required for each trade publication you would like approved.

| | |
|---|---|
| 1. Identify Trade | <input type="text"/> |
| 2. How is your publication known by the community? | <input type="text"/> |
| 3. How is your publication used by the trade? | <input type="text"/> |
| 4. How do you reach new members of the identified trade? | <input type="text"/> |
| 5. What information or resources does your publication provide that addresses the unique needs or promotes the interests of this trade? | <input type="text"/> |
| 6. What percentage of the content is aimed toward this trade? | <input type="checkbox"/> < 25% <input type="checkbox"/> < 25%- 50% <input type="checkbox"/> > 50% |

Please complete for **Focus Paper** consideration (Documentation to support your answers is required under Section D):

| | |
|---|---|
| 1. How is your publication known by the DVBE community? | <input type="text"/> |
| 2. How is your publication used by the DVBE Community? | <input type="text"/> |
| 3. How do you reach new members of the DVBE community? | <input type="text"/> |
| 4. What information or resources does your publication provide that addresses the unique needs or promotes the interests of the DVBE community? | <input type="text"/> |
| 5. What percentage of the content is aimed toward DVBE community issues? | <input type="checkbox"/> < 25% <input type="checkbox"/> < 25%- 50% <input type="checkbox"/> > 50% |

C. DVBE REFERRAL ORGANIZATION (Complete Section C if you are applying to be a referral organization.)

| | |
|--|---|
| How do you provide referrals? | <input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Email list of referrals <input type="checkbox"/> Email link to database, publication, newsletter, directory, website, bulletin board, etc. |
| Identify source for your referral list? | <input type="checkbox"/> DGS Certified Small Business Database <input type="checkbox"/> DGS Certified DVBE Database <input type="checkbox"/> Caltrans DBE Database <input type="checkbox"/> CPUC Supplier Diversity Clearinghouse <input type="checkbox"/> Other: <input type="text"/> |
| Indicate your service area: | <input type="checkbox"/> Northern CA <input type="checkbox"/> Central CA <input type="checkbox"/> Southern CA <input type="checkbox"/> Bay Area <input type="checkbox"/> Statewide <input type="checkbox"/> Other <input type="text"/> |
| Is there a fee charged ? | <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate amount <input type="text"/> How many free referrals do you offer? <input type="text"/> |
| What DVBE Resources do you utilize to provide referrals? | <input type="text"/> |
| In addition to referrals what other services are provided? | <input type="text"/> |
| Is membership required to obtain other services? | <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate fee if required <input type="text"/> |
| Do you maintain a free plan room? | <input type="checkbox"/> No <input type="checkbox"/> Yes |

D. SUPPORT DOCUMENTATION (The following documentation must be included with your application. Additional documentation can be submitted in support of your publication.)

| | |
|---|---|
| <input type="checkbox"/> A brief description of how your organization/publication provides networking between prime contractors and DVBE subcontractors. Keep in mind this information is public and may be used as a description in the DVBE Resource Guide. | <input type="checkbox"/> Attach copies of list rate/rate sheet for paid subscribers |
| <input type="checkbox"/> Membership materials, including rates charged | <input type="checkbox"/> Proof of past referrals or business relationships established |
| <input type="checkbox"/> Recent copies of publications (last 3 publications)** | <input type="checkbox"/> Rate Sheet for levels of services provided |
| <input type="checkbox"/> If publication is electronic, provide proof of website counters or statistics documenting readers | <input type="checkbox"/> Attach items that document how readers view your publication |
| | <input type="checkbox"/> Attach proof of your ratio of referrals or ads to successfully awarded bids , if available |

**Please indicate if you would provide a copy of your publication free of charge to display in our lobby

By my signature, I hereby certify that this organization/publication provides services as stated in this application and supporting documentation submitted herewith. I understand that upon approval for a trade and/or focus paper, or as an agency requesting to be listed as a Referral Organization, that the approval is subject to review at any time and I may be requested to submit additional documentation.

| | | | |
|--------------|----------------------|-------|----------------------|
| Signature | <input type="text"/> | Date | <input type="text"/> |
| Printed Name | <input type="text"/> | Title | <input type="text"/> |