



**National Small Business Week**  
**SBA Form 3310, Small Business Development Center**  
**Excellence and Innovation Center Award**

**Instructions:**

This form must be completed by the nominee or by the nominator. The completed form must be submitted with the nomination package as noted in the award guidelines. Answer each question as fully as possible; if it is not applicable, state N/A.

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1. SBDC Information:
  - a. Name:
  - b. Address:
  - c. Phone number:
  - d. Email address:
  - e. Website URL:
2. SBDC Director Information:
  - a. Name:
  - b. Phone number:
  - c. Email address:
3. Host organization information:
  - a. Organization name:
  - b. Executive director name:
4. Nominator Information (if applicable):
  - a. Nominator name:
  - b. Title:
  - c. Address:
  - d. Phone number:

e. Email address:

5. Fill out the chart below. Additional goals and performance measures can be included in the “other” categories.

	<u>Goal</u>	<u>Actual</u>	<u>% Achieved</u>
<b>Long Term Counseling Clients</b>			
<b>New Business Starts</b>			
<b>Capital Infusion</b>			
<b>Client Satisfaction</b>			
<b>Other:</b>			
<b>Other:</b>			

**Answer each of the following questions in 200 words or less.**

6. Provide a description of the SBDC’s services:
7. Provide a history of the SBDC:
8. Provide a narrative of an SBDC counselor who has excelled in providing counseling, training and other program services to small businesses:
9. Provide a narrative of a success story relating to a particular business served by the SBDC:

10. Provide a narrative of how the SBDC has worked with the local SBA District Office as a champion for SBA products and services including effective amplification of the SBA mission and priorities and strong education efforts about the SBA and its programs to small businesses:

11. Provide qualities and performance of the SBDC that merit the award:

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**Caution:**

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of program participation or other benefits awarded by the agency. A false statement is punishable under 18 USC 1001 by imprisonment of not more than five years and/or a fine of not more than \$10,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

**Paperwork Reduction Act Notice:**

SBA will use the information collected on this form, along with other information submitted by award nominees as part of the nomination package, to determine the nominee's eligibility for a particular small business award; to identify any actual or apparent conflict of interest and, to make eventual award determinations. Responding to this request for information is voluntary. However, failure to provide the requested information may affect SBA's ability to make a decision regarding your eligibility for an award.

You are not required to respond to any collection of information unless it displays a currently valid OMB control number (3245-0360). The estimated burden for completing this form is 1 hour and 45 minutes, including the time for reviewing the instructions, and gathering and compiling data. Combined with the time for completing the Form 3300, the total estimated time to prepare and submit the nomination package for each nominee is 90 minutes. Comments on this burden estimate should be sent to the U.S. Small Business Administration, Chief, AIB 409 3rd St., SW, Washington, DC 20416, and Desk Officer for the U.S. Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, DC 20503. **DO NOT SEND COMPLETED FORMS TO OMB. Submit them to the location indicated in the nomination guide.**