SUPPORTIVE SERVICES FIELD FORM

FIRM NAME:	
PRIMARY CONTACT:	
PHYSICAL ADDRESS:	
CITY: STATE:	ZIP CODE:
PHONE: FAX:	EMAIL:
TYPE OF BUSINESS (Certifications): DBE	MBE WBE
TYPES OF WORK PERFORMED:	
# OF FULL-TIME EMPLOYEES: # OF PART-TIME EMPLOYEES:	
REFERRED BY: TITLE:	EMAIL:
PHONE: REASON FOR REFERRAL:	
PROGRAM ASSISTANCE NEEDS:	
Please check the types of assistance you believe the firm needs to receive from the list below:	
Record Keeping	Contract Compliance
Financial Management	How to Read Specs, Plans & RFPs
Access to Capital/Funding	Project Scheduling
Equipment Needs	Marketing & Public Relations
Bonding, Financing & Insurance	Human Resources
Strategic Planning	Operational Management
Management Training	Legal
Workforce Needs	Business Plan Development
DBE Certification _	Employment Law/Labor Requirements
Proposal Development	CUF Review
Bidding & Estimating	Other:

Mailing Address:

NC DEPARTMENT OF TRANSPORTATION
OFFICE OF CIVIL RIGHTS
BUSINESS OPPORTUNITY WORKFORCE DEVELOPMENT
1511 MAIL SERVICE CENTER
RALEIGH, NORTH CAROLINA 27699-1511

Christy Thaxton Business Opportunity and Workforce Development Office of Civil Rights (OCR)