**MBECA SEBD Roundtable Intake Survey**

1. SEBD Certification Number - #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Participant Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Industry Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Description of business (including products and services):
7. Annual Gross Revenues (most recently completed calendar/fiscal year): $\_\_\_\_\_\_\_\_\_\_\_\_
8. Employee Count (current)
   1. Full-Time = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Part-Time = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. Briefly explain why you would like to participate in the SEBD Roundtable series.
10. Briefly explain what you hope to accomplish through the SEBD Roundtable series.

Please complete the form and email it back to me at [mbeca@mbeca.org](mailto:mbeca@mbeca.org). If you should have any questions, please call me (Lee Melancon) at 225.445.1383.