

VETERANS ENTERPRISE GRANT

BUSINESS APPLICATION QUESTIONNAIRE

Purpose: This questionnaire is used for preliminary review of applications to the 360Via Veterans Enterprise Grant Program. The program is intended for qualifying veteran-owned U.S. businesses seeking growth capital. Individual awards are expected to range from \$500,000 to \$1,000,000, subject to eligibility, due diligence, available program funds, final approval, and definitive grant documentation.

1. APPLICANT INFORMATION

Applicant full legal name: _____

Title / position: _____

Email address: _____

Telephone: _____

Residential city/state: _____

Preferred method of contact: _____

Date of application: _____

2. VETERAN ELIGIBILITY

☐ U.S. Army ☐ U.S. Navy ☐ U.S. Air Force ☐ U.S. Marine Corps ☐ U.S. Coast Guard ☐ U.S. Space Force

Branch / component if not listed: _____

Years of service: _____

☐ Active Duty Veteran ☐ Reserve Veteran ☐ National Guard Veteran ☐ Other qualifying status

Discharge / separation status (if applicable): _____

☐ Yes - I can provide documentation supporting veteran status ☐ No

Supporting veteran-status documentation may be requested during due diligence.

3. BUSINESS INFORMATION

Legal business name: _____

DBA / trade name (if applicable): _____

Business address: _____

City / State / ZIP: _____

Website: _____

EIN: _____

State of formation: _____

Year established: _____

☐ LLC ☐ Corporation ☐ Partnership ☐ Sole Proprietorship ☐ Other

Industry / NAICS (if known): _____

Primary business activity: _____

Number of current employees: _____

Percentage of business owned by qualifying veteran(s): _____

4. OWNERSHIP & MANAGEMENT

List all owners holding 10% or more and state each ownership percentage:

Identify key management personnel and their roles:

☐ Yes - applicant is authorized to act for the business ☐ No

If no, identify the authorized representative and explain:

5. GRANT REQUEST

Grant amount requested (USD): \$

☐ \$500,000-\$749,999 ☐ \$750,000-\$999,999 ☐ \$1,000,000

Describe the primary purpose of the requested grant:

Proposed use of funds (enter estimated amount for each applicable category):

Category	Estimated Amount	Description / Notes
Business expansion	\$	
Equipment / infrastructure	\$	
Hiring / workforce	\$	
Technology / innovation	\$	
Marketing / distribution	\$	
Working capital	\$	
Other approved business purpose	\$	

6. BUSINESS PERFORMANCE

Most recent annual gross revenue: \$

Prior-year annual gross revenue: \$

Current annualized revenue (if applicable): \$

Current monthly operating expenses: \$

☐ Profitable ☐ Break-even ☐ Pre-profit / growth stage ☐ Pre-revenue

Briefly describe the company's current financial position:

List any material existing loans, liens, judgments, or financial obligations:

7. GROWTH PLAN & ECONOMIC IMPACT

What specific business opportunity will this grant allow the company to pursue?

Describe the milestones you expect to achieve within 12 months of receiving the grant:

Estimated number of new U.S. jobs to be created:

Estimated number of existing U.S. jobs to be retained:

Describe the expected economic, community, industry, or veteran-related impact:

8. BANKING & DISBURSEMENT INFORMATION

Business bank name: _____

Account name: _____

Bank city/state: _____

☐ Business checking ☐ Business savings ☐ Other

☐ Yes - the applicant / authorized representative is a signatory ☐ No

Do not provide account numbers, passwords, PINs, online-banking credentials, or other sensitive access information in this questionnaire.

9. SUPPORTING DOCUMENTATION

Please indicate documents currently available:

☐ Business formation / registration documents ☐ EIN confirmation

☐ Proof of veteran status ☐ Ownership / capitalization records

- ☐ Business plan / executive summary ☐ Financial statements
- ☐ Business bank statements ☐ Federal / state tax documentation
- ☐ Project / expansion budget ☐ Detailed use-of-funds schedule
- ☐ Other supporting documentation

10. COMPLIANCE & APPLICANT DECLARATIONS

- ☐ The information provided in this questionnaire is true and complete to the best of my knowledge.
- ☐ The applicant understands that submission of this questionnaire does not constitute approval, an offer, or a guarantee of grant funding.
- ☐ The applicant authorizes 360Via to request reasonable supporting documentation and conduct eligibility, identity, ownership, compliance, and due-diligence reviews.
- ☐ If awarded, grant proceeds will be used only for purposes approved in the definitive grant agreement.
- ☐ The applicant understands that grant recipients may be required to provide expenditure, progress, and impact reporting.
- ☐ The applicant understands that tax treatment may vary and that 360Via does not provide legal or tax advice.

11. CERTIFICATION & SIGNATURE

Authorized applicant name: _____

Title: _____

Signature: _____

Date: _____

IMPORTANT NOTICE

The 360Via Veterans Enterprise Grant Program is subject to program eligibility, due diligence, compliance review, availability of funds, and execution of definitive grant documentation. Published award ranges do not constitute an unconditional commitment to fund. 360Via may request additional information, approve or decline an application, determine an award amount, or establish appropriate disbursement milestones under the governing program terms.