



Caltrans District 11 Small Business Council Application



Thank you for your association's interest in the work of the Caltrans District 11 Small Business Council.

Please respond to ALL questions contained in this application form and provide requested documentation. **Please note, we will not be able to process applications which are not filled out completely, missing requested documentation or unsigned.**

PLEASE PRINT

Date of your application: _____ Referred by: _____

1. Name of your trade association: _____

2. Association President/Chair name: _____ Title: _____

President/Chair email address: _____

3. Physical address of your trade association:

Street: _____ City: _____ State: _____

Zip Code: _____ URL: _____

Mailing address (if different from the association's physical address):

Street: _____ City: _____ State: _____

Zip Code: _____

Office phone: (____) _____ Fax: (____) _____

4. Name of your association's **primary** Council member nominee: _____

Contact information: Phone (____) _____ Email _____

Primary's employer or business name: _____

Mailing address: _____

Primary Council Member title in the Association: _____

5. Name of your association's **alternate** Council member nominee: _____

Contact information: Phone (____) _____ Email _____

Alternate's employer or business name: _____

Mailing address: _____

Alternate Council Member title in the Association: _____

6. Is your trade association currently a member of the Caltrans Statewide Small Business Council?

Yes or No: _____ If yes, please attach a copy of your acceptance letter from the Caltrans Statewide Small Business Council. You do not need to complete the remainder of the application or submit a roster. If you are not currently a member of the Caltrans Statewide Small Business Council, please complete the remainder of the application and provide all required materials.



Caltrans District 11 Small Business Council Application



- 7. Is your small business trade association organized under the laws of California?
Yes or No: _____ **Required:** Attach documentation from the California Secretary of State verifying your trade association is currently registered in the state of California as a mutual benefit organization **OR** the association's California registration number: _____
- 8. Does your association have a primary business interest in contracting with Caltrans? Yes or No: _____
- 9. If so, which area(s)? (Check all that apply): Construction Commodities Architecture
Engineering Other: _____
- 10. How many members does your association represent? _____
Required: Complete Attachment A, Roster of at least 35 of your members' names, company names, and cities of main operations (see the last three pages of this form)
OR attach a copy of a current existing membership roster listing the same requested information.
- 11. Is your association: Local Regional Statewide Nationwide International
- 12. Why is your association interested in being part of the Caltrans District 11 Small Business Council?

[Add more sheets as needed.]

13. Time commitment:

The Construction/Commodities Committee meets five (5) times a year (February, April, June, August and October) on the fourth Wednesday, 8:00 a.m. to 9:15 a.m. The Council meetings are on the same day from 9:30 a.m. to 12:00 p.m. Meeting dates and locations are confirmed in January, when the work of both the committees and the Council is determined. Council members can be removed after two consecutive absences at regularly scheduled meetings.

Are association representatives able to make this time commitment to the Council? Yes or No: _____

Association President/Chair Signature

Check list of application documents:

- 1. Application form
 - 2. Documentation from the California Secretary of State verifying your trade association is currently registered in the state of California as a mutual benefit organization **OR** the association's California registration number.
 - 3. Roster of a minimum of 35 members (name; company; city of main operations).
- Optional: Samples of your trade association's materials (brochure; event flyer; etc.).



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You are welcome to submit your application as follows:

- Mail – Caltrans District 11 – Attn: Small Business Council Member Application, 4050 Taylor Street, MS -120, San Diego, CA 92110

Your request for membership will be reviewed by the Council Chair. The Council Chair will respond to all requests for membership in writing. Should you have any further questions, contact Michelle Gongora at michelle.gongora@dot.ca.gov , or by phone at (619) 688-6706.



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ATTACHMENT A: Roster of Applicant's Association Members*

* A copy of a current existing association/organization membership roster containing a minimum of 35 members (name, company name, and city of main operations) can be submitted in lieu of this attachment.

Member's Name	Name of Member's Company	City of Main Operations
1.		
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Caltrans District 11 Small Business Council Application



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