

Micro Enterprise Workshop

November 2-3, 2004

Hosted by Richland County Board of MRDD
At Mid Ohio Educational Services Center
1495 West Longview Ave, Mansfield OH 44902

Individuals with disabilities can start their own business and create personal wealth as part of Ohio's goal of self-determination. The two-day workshop conducted by nationally recognized experts from the Center for Self-Determination will include:

- Personal testimonies by Ohio enterprise teams
- Opportunities and barriers for small business ownership
- Understanding steps in building and implementing a business plan
- Using individual budgets and public resources as part of a business plan
- Role of direct care staff and family as supports for the business
- Development of initial business plans

Darcy Smith and **Doreen Rosimos** founding partners of **Income Links, LLC**, New Hampshire, whose mission is to assist people with disabilities to start their own businesses. Darcy and Doreen are personal planning Consultants at the Center for Self-Determination and have conducted numerous micro enterprise workshops.

Registration options: Registration for both Enterprise Teams and Individual Registration may be limited and requires application one week prior to the training.

Individual Registration - \$35 per person for individuals who wish to participate in the training but are not a member of an Enterprise team. (Compete the form below)

Name _____ Position _____

Agency _____

Address _____

City _____ State ____ Zip _____

Phone (____) _____ Fax (____) _____

Make checks and PO's payable to **Employment Outcome – MRDD.Net**
191 Somerset Road, Delaware, OH 43015

Enterprise Teams – See instructions on the reverse side for special team registration options and instructions for completing the Enterprise Team registration form. For registration of additional members of an Enterprise Team, please use the Individual Registration form and rates.

ODMRDD Certification – This training is approved for **13** hours toward the following types of certification/registration - **Adult Services, Case Management, Investigative Agent, County Board of MR/DD Training, and Superintendent (Services/Programs/Support Services)**

Continental breakfast and lunch will be provided both days, supper is on your own. The workshop will begin at 9:00 a.m. on the first day and end at 4:00 p.m. on second day. For overnight accommodations we recommend staying at the Comfort Inn North, 500 N. Trimble Road, Mansfield, OH telephone 419-529-1000

Registration Deadline October 25, 2004

Micro Enterprise Workshop

Would you like to start your own business?

If yes, then you have some planning and hard work ahead of you, but there is help including a grant from the Ohio Developmental Disabilities Council.

First, you must create an Enterprise Team to help you. This team will be made up of family and friends who will assist and support you. It may also include staff from agencies who are currently providing you services or new agencies who want to help you get a job or start a business. It will also include staff from the Board of Mental Retardation and Developmental Disabilities (MRDD) who will help you develop a business plan so you can access the grant funds. The team may also include people who have information on how to manage the business that you want to start. Talk to your family, friends and staff and ask them if they are willing to help you.

The next step is to complete the application, contact your County Board of MRDD and ask if they will sponsor your application. If they agree and assign required members to your team, you can make application and start planning for your business.

You will then meet with your Enterprise Team and talk about the type of businesses that you could operate. The Enterprise Team will help you decide which businesses are best and help you to begin developing your business plan.

Enterprise Team Registration and Training

This two-day, hands-on, training session is open for Enterprise Teams from across Ohio. For a team to be selected for the training, they must complete the attached application and have commitments from the key members of their team. The sponsoring County Board of MRDD must agree to fund the full cost of the training, \$100 per team. Team registration is limited to four people including the owner. Please complete attached Enterprise Team registration form. Additional team members may register at \$35 per person by completing the Individual Registration form.

Grant Funding

The Ohio Developmental Disabilities Council's Employment Outcome grant will provide a maximum of \$2,500 as match for \$2,500 of local funds for an approved business plan. For designated poverty counties, the grant is increased to a maximum of \$3,500 with a local match of \$1,500. The maximum funding from the grant including local, state and grant funds is \$5,000. The plan must include any additional funds that will be used and how support of the business will continue during and after the first year of operation.

Identify key members of the Enterprise Team

The first step is to identify people who can help you start your business and what they can do for you.

Owner (a person who is eligible for services from a County Board of MRDD):

The person who is the driving force of the business. Describe personal assets and skills that the owner has that will be key to the success of the business. Identify assets and skills that will be required of other business partners and associates.

Personal Supporter:

This will include family and friends who are committed to assist with the business and share in the risk. Identify their personal and professional assets and skills and to what extent that these may be provided at no cost, at a discounted rate or from profits of the business.

Professional Supporters:

This will include Service Coordinators and Personal Agents who work with the individual with a disability who have the desire, commitment and flexibility to change the current support resources from a social services model into an enterprise opportunity.

Funders and Administrators:

This is a funding and policy decision-maker that has authority to change staff assignment and funding practices. Determine if this person will support changing needed to enable enterprise opportunities to work.

Why are you asking about my previous wages?

We want to compare how your wages and income changes from before you start your business to after. If you accept the grant, we will need to receive information on how your business is progressing and how much money you are earning. We also would like to hear about other changes in your life. This information is needed for us to know if the grant is working and helping people become successful.

If you have any questions on the grant please email or call

Robert R. Morgan
Employment Outcome, Project Coordinator
Email – Morgan@mrdd.net
191 Somerset Road
Delaware, OH 43015
Phone 740-272-1658 Fax 740-369-4911

Funded by the Ohio Developmental Disabilities Council under the Developmental Disabilities Assistance and Bill of Rights Act, Public Law 104-183.
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Application for Enterprise Team Training

Application may be submitted as a word processing document in same format.

Identify key members of the Enterprise Team

Name of Business Owner _____
Address _____ City _____ OH Zip _____
Telephone _____ Email _____
Previous Employment History (include job type and length of employment)

Wages earned in tax year as reported on W-2's (Complete as many as available)

Year	2003	2002	2001	2000	1999
Gross Wages					

What assets and skills does the owner bring to the team?

Name of Personal Supporter(s) _____
Address _____ City _____ OH Zip _____
Telephone _____ Email _____
Relationship to owner
Assets and skills brought to the team

If more than one please attach additional information

Name of Professional Supporter(s) _____ Position _____
Address _____ City _____ OH Zip _____
Telephone _____ Email _____
Relationship to owner
Assets and skills brought to the team

If more than one please attach additional information

Name of Administrative Authority _____ Position _____
Address _____ City _____ OH Zip _____
Telephone _____ Email _____
Relationship to owner

Authority to approve Individual Budget Plan up to \$ _____ per year.

Please answer the following questions on a separate sheet:

How often has the Enterprise Team met to discuss business opportunities?

What business opportunities have been considered?

What are the primary barriers that must be addressed?

What additional professional and support resources will be needed?

Send Application and a Purchase Order for \$100 to Employment Outcome – MRDD.Net , 191 Somerset Road, Delaware, OH 43015
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