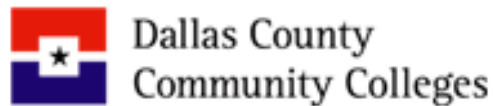




# Dallas Alliance Business Coaching Program



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## **Dallas Alliance Business Coaching Program**

### **Introduction and Purpose**

The Business Coaching Program aims to stimulate the growth of disadvantaged, minority and women-owned businesses (D/M/WBE) through education, business development, training, and meaningful participation in business opportunities. This program is designed to help the D/M/WBE move to the next level of success. Under the guidelines of this program, a Protégé will receive consultation from a Mentor or Business Coach for a minimum expectation of 1 year.

A contact person will be assigned from the Mentor Company to facilitate assistance to the Protégé from the various resources available within the Mentor Company. While business between the Mentor and the Protégé is not prohibited, *it is not guaranteed nor is it the purpose of this program.*

### **Definitions**

**Oversight Committee-** includes representatives from the Dallas Black Chamber of Commerce, Greater Dallas Asian American Chamber of Commerce, Greater Dallas Hispanic Chamber of Commerce, Dallas Independent School District (Dallas ISD), Dallas County Community College District (DCCCD), and City of Dallas.

Oversight Committee's Mailing Address and Central Point of Contact: Greater Dallas Hispanic Chamber of Commerce, Attn. Maribel De Leon, 4622 Maple Avenue., Suite 207, Dallas, TX, 75219, Phone: 214.521.6007

**Protégé-** A business owner who is willing to receive business knowledge, skills, and experience from a Mentor or Coach. The Protégé will have a group of Coaches in which a Protégé can select any one from the list to work with them on an issue related to their specific business need.

**Mentor -** An experienced business owner, who exhibits proficient leadership, maintains confidentiality, willing to counsel, and able to share their business knowledge, skills, and experience with the Protégé.

**Business Coach-** An expert in his/her field of business and is willing to meet one-on-one with several Protégés during the year to discuss and work on a specific business issue for a specific time frame and facilitate a workshop in your field of expertise.

### **Policy**

The Business Coaching Program provides a vehicle for local D/M/WBE emerging entrepreneurs to partner with experienced businesses to enhance their business development and growth. Through successful matching of Mentors to Protégés, the program helps expand entrepreneurs' technical, management, marketing, and other skills identified for improvement.

## **Qualifications**

Eligibility to become a **Protégé**:

- Current Dallas ISD, DCCCD, City of Dallas Vendor and/or other participating public entities.
- Is not debarred or suspended from doing business with the State of Texas, Dallas ISD, City of Dallas, DCCCD and/or other participating public entities.
- A D/M/WBE certified vendor (certification is recognized from NCTRCA, DFWMSDC, WBC Southwest, etc.) will be given consideration as a protégé.
- Has been in business for a minimum of 3 years of business experience and has a written business plan.
- Ability to identify the type of guidance needed for business development.
- Has participated in previous pre-bid meetings (prime or sub), workshop or seminar held by Dallas ISD, DCCCD, the City of Dallas and any other participating public entities.

Eligibility to become a **Mentor**:

- Has at least 4 years of business operations experience.
- Is willing to advise and support the Protégé.
- Is willing to help identify the criteria business needs lacking in the company and skill level of the Protégé.
- Possess financial stability within own business operations.
- Is not debarred or suspended from doing business with the State of Texas, Dallas ISD, DCCCD, City of Dallas or any other participating public entities.
- Ability to provide developmental guidance in areas identified by the Protégé.

Eligibility to become a **Business Coach**:

- Has at least 4 years of expertise in their field.
- Is willing to facilitate a workshop or seminar in your field of knowledge.
- Is willing to meet with more than one Protégé on an individual basis and/or small setting to give assistance with expanding their proficiency and capabilities in a specific area at different times during the duration of the program.

## **Time Duration**

Time frame for the agreement will be a minimum of 1 year, renewable upon mutual agreement between the parties and approval of the oversight committee.

## **Program Expectations**

Each participant (Protégé, Mentor and Business Coach) is expected to:

- Attend the mandatory orientation by the Oversight Committee explaining the program, roles, and responsibilities for the Mentor, Protégé and Business Coach.
- Sign the agreement between the Mentor and Protégé.
- Business Coaches will be expected to sign a commitment agreement for the program.
- Decide upon mutually beneficial time commitments and schedules with a minimum expectation of five (5) hours per month.

- Participate in training courses and/or workshops organized by the Oversight Committee.
- Keep records of their contacts, meetings, networking events, pre-bid meetings, and other accomplishments during the program.
- Provide monthly feedback on their progress to the Oversight Committee.
- Set obtainable goals and objectives to be completed during the duration of the program.
- Complete an Annual Evaluation of the Mentor, Protégé and Business Coach relationship.

**Business Coaching Agreement – Mandatory Provisions**

- Must be in writing.
- Must include an assessment of the Protégé’s business needs.
- Must include a description of the specific assistance that the Mentor and/or Business Coach will provide to address those needs.
- Must be able to commit for at least one year.
- Must include a provision that either party can terminate with 30 days advance notice to the other party and oversight committee.
- Participants shall consent and hold harmless the public entities (Dallas ISD, DCCCD, City of Dallas and other public entities), its members, officials and board of trustees from and against all claims from any person, which arises out of or is related to participation in the Business Coaching Program. Participants must also consent and hold harmless the Chambers of Commerce (DBCC, GDAACC, and GDHCC), its members, officials and board of directors from and against all claims from any person, which arise out of or is related to participation in this Business Coaching Program.

## Business Coaching Program Agreement

(“Agreement”) made this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ between \_\_\_\_ with principal offices located at \_\_\_\_\_ (“Mentor) and \_\_\_\_\_ with principal offices located at \_\_\_\_\_ (“Protégé”).

Mentor and Protégé are participants in the Business Coaching Program;

Mentor desires to provide to Protégé a variety of recommendations and guidance relating to many facets of Protégé’s business (collectively, “the Guidance”), without any cost to Protégé

Protégé desires to obtain the guidance from Mentor and understands that Mentor may not be willing to provide the guidance without the execution of this Agreement by Protégé;

Protégé acknowledges that the Program and the advice from Mentor is intended only to provide an informal resource to Protégé, and that Protégé is solely responsible for its business decisions;

Protégé and Mentor/ acknowledge that Mentor’s participation in the Program and its commitment to give help may be terminated at will by either party, with a 30 day written notice;

In consideration of the mutual agreement, the Protégé and Mentor agree as follows:

**Section 1. Release.** Protégé, for and on behalf of itself, as well as all corporations, partnerships, persons (whether natural or artificial), firms or entities joined with or related to, directly or indirectly, Protégé (collectively, “the Protégé Affiliates”) hereby releases, acquits, waives, and forever discharges, and promises not to sue, Mentor or any corporation, partnership, person (whether natural or artificial), firm or entity joined with or related to, directly or indirectly, Mentor (collectively, “the Mentor Joines”), from any and all liability of any character, type or description whatsoever resulting from the Guidance, Mentor’s agreement to provide the Guidance or by reason of any action or alleged action, taken or misplaced, by Mentor in connection with the provision of the Guidance.

**Section 2. Indemnification.** Protégé, for and on behalf of itself and the Protégé Affiliates, hereby indemnifies and holds harmless Mentor and Mentor Affiliates from and against any and all charges, claims, losses, liabilities, expenses, damages, judgments, fines, penalties, attorneys’ fees and costs actually and reasonably incurred by the Mentor in connection with any proceeding of whatever nature and description, whether accrued or contingent, real or threatened, arising by virtue of Mentor’s agreement to provide the Advice or by reason of any action or alleged action taken or misplaced, by Mentor in connection with the provision of the guidance. Mentor and Protégé shall consent and hold

harmless the public entities (Dallas ISD, DCCCD, City of Dallas and other public entities), its members, officials and board of trustees from and against all claims from any person, which arises out of or is related to participation in this Business Coaching Program. Participants must also consent and hold harmless the Chambers of Commerce (DBCC, GDAACC, and GDHCC), its members, officials and board of directors from and against all claims from any person, which arise out of or is related to participation in this Business Coaching Program.

**Section 3. Representations, Warranties and Covenants.** Protégé , for and on behalf of itself and the Protégé Affiliates, represents warrants and promises to Mentor that: (i) it has not previously and will not in any manner whatsoever in the future assign, transfer, pledge, hypothecate or otherwise express or encumber any rights or claims released pursuant to Section 1 of this Agreement; (ii) the terms and effects of this Agreement and legal effect thereof have been fully explained to it by its own legal counsel; (iii) it believes that this Agreement is helpful to itself; and (iv) it is duly authorized and able to execute this Agreement.

**Section 4. Confidentiality.** Mentor and Protégé agree equally to maintain privacy of information learned about the other’s firm.

**Section 5. Mentor Termination Procedures (Agreement Termination Clause)**

Provisions within the agreement will allow either party to write a justifiable 30-day termination notice to the Oversight Committee. In the event of termination, written notice shall be provided by the terminating party stating the reason for termination to the Oversight Committee. After the Oversight Committee reviews the response, the terminating party may elect to continue the program or issue a formal termination.

Mentor Business Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State, Zip:

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Protégé Business Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State, Zip:

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature:

\_\_\_\_\_

**Dallas Alliance Business Coach Program  
2011 MENTOR APPLICATION FORM**

**Form must be returned by February 18, 2011.**

<b>MENTOR PROFILE</b>	
Business Name:	
Contact Name:	
Title:	
Address, City, State, Zip:	
Telephone: _____	Fax: _____
Email: _____	Web Site: _____
Core Business: _____ (I.e. Finance, Technology, Consultant, etc) _____	
Please list association, organization memberships and/or Boards that you are involved in:	

Please type an "X" over the boxes below to indicate the areas in which your company is able to provide mentoring assistance (if possible):			
___	Bidding	___	Legal
___	Contract Negotiations	___	Contract Management
___	Proposal Writing	___	Marketing /Sales/Presentation Skills
___	Strategic Planning	___	Web Site Creation
___	Finance/Cash Flow		
___	Other areas (please list):		

Previous Experience as a Mentor (name of the program, name of the Protégé, duration of the program, areas providing assistance, short description): _____ _____ _____ _____ _____
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Please include any additional information that will help the Oversight Committee to select suitable protégés for your company to mentor:

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### **PROGRAM REQUIREMENTS**

The Dallas Alliance Business Coaching Program will begin March 10, 2011 with a mandatory orientation held for Mentors, Protégés and Business Coaches. The orientation will provide valuable information about the operation of the program, so that Mentors, Protégés and Business Coaches understand their commitments and how to gain the most from the program. Important program materials (i.e. legal agreements and feedback forms) will be distributed and explained at this time.

I agree to attend all required training, meetings, and workshops as part of the Business Coaching Program.

Contact Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)**  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219

**Dallas Alliance Business Coaching Program  
2011 BUSINESS COACH APPLICATION FORM**

**Business Coach Application Form will be accepted by the Oversight Committee throughout the year.**

<b>BUSINESS COACH PROFILE</b>
Business Name: _____
Contact Name: _____
Title: _____
Address, City, State, Zip: _____
Telephone: _____ Fax: _____ Mobile: _____
Email: _____ Web Site: _____
Core Business: _____ (i.e. Finance, Technology, Consultant, etc) _____
Please list associations, organization memberships and/or boards that you participate in: _____ _____ _____

Please list the subject in which you are willing to coach a company(s): _____ _____ _____ _____ _____ _____ _____ _____
---

List any licenses and certifications _____ _____ _____ _____ _____
---

**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219**

# Dallas Alliance Business Coaching Program

## Business Coach Commitment Form

I, \_\_\_\_\_ with \_\_\_\_\_ agree to be a Business Coach with the Dallas Alliance Business Coaching Program with the following oversight committee members; Dallas Black Chamber of Commerce, Greater Dallas Asian American Chamber of Commerce, Greater Dallas Hispanic Chamber of Commerce, Dallas Independent School District (Dallas ISD), Dallas County Community College District (DCCCD), and City of Dallas.

The program's purpose aims to stimulate the growth of disadvantage, minority and women-owned businesses (D/M/WBE) through education, business development, training, and meaningful participation in business opportunities. This program is designed to help the D/M/WBE move to the next level of success. Under the guidelines of this program, a Protégé will receive consultation from a Mentor or Business Coach for a minimum expectation of one-year. Additionally, the policy of the Business Coaching Program is to provide a vehicle for local D/M/WBE emerging entrepreneurs to partner with experienced businesses to enhance their business development and growth. Through successful matching of Mentors to Protégés, the program helps expand entrepreneurs' technical, management, marketing, and other skills identified for improvement.

I understand that I will be providing the business coaching services to the Protégés as an expert in my field of business knowledge. I will be willing to meet one-on-one or small group sessions with several Protégés during the year to discuss and work on a specific business issues for a specific time frame and to facilitate a workshop/seminar.

If I am unable to complete my commitment to the terms of the Business Coaching Program, I will submit in writing to the oversight committee member a letter of termination.

Signature:

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Date:

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Acknowledge by a Member of the Oversight Committee:

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**Dallas Alliance Business Coaching Program  
2011 PROTÉGÉ APPLICATION FORM**

**Form must be returned by February 18, 2011.**

<b>REFERRAL INFORMATION</b>
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Organization/Agency Referred by:
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<b>PROTÉGÉ PROFILE</b>
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Business Name:
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Contact Name:
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Title:
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Address, City, State, Zip:
----------------------------

Telephone: _____ Fax: _____ Mobile: _____
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Email: _____ Web Site: _____
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Certification Type and Number:
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Years in Business:
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Annual Sales Volume:
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Number of Employees:
----------------------

Business Description: (Please provide a brochure if you have one)
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_____
_____
_____

Have you ever submitted a bid to the City of Dallas, Dallas ISD, or Dallas County Community College District? <input type="checkbox"/> YES or <input type="checkbox"/> NO
---

If yes, were you awarded the bid/contract? <input type="checkbox"/> YES or <input type="checkbox"/> NO
--

Where is your primary business located i.e. office building, home or incubator Please list address if different from the one above. _____
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_____
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Have you ever participated in a Business Coaching Program? If yes, please include the year of participation and name of your mentor company:
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_____
_____
_____

Please list associations, organizations memberships and certifications with expiration date (local, state and national): _____
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_____
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Please provide 2 references:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please type an "X" over the boxes below to indicate in which areas you would like to receive mentoring assistance (if possible):

<input type="checkbox"/>	Bidding	<input type="checkbox"/>	Legal
<input type="checkbox"/>	Proposal Writing	<input type="checkbox"/>	Contract Management
<input type="checkbox"/>	Contract Negotiations	<input type="checkbox"/>	Marketing /Sales/Presentation Skills
<input type="checkbox"/>	Strategic Planning	<input type="checkbox"/>	Finance and Cash Flows
<input type="checkbox"/>	Other areas (please list):		

Why do you want to participate in the Dallas Alliance Business Coaching Program?

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## **PROGRAM REQUIREMENTS**

The Dallas Alliance Business Coaching Program will begin in March 2011 with a mandatory orientation held for mentors, protégés and business coaches. The orientation will provide valuable information about the operation of the program, so that mentors, protégés and business coaches understand their commitments and how to gain the most from the program. Important program materials (i.e. legal agreements and feedback forms) will be distributed and explained at this time.

I agree to attend all required training, meetings, and workshops as part of the Business Coaching Program.

Contact Name: \_\_\_\_\_

Date:

Signature:

**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219**

**MENTOR’S MONTHLY FEEDBACK ANALYSIS**

- 1. What was the Protégé’s goals for the month?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 2. What progress have you and the Protégé made toward achieving the stated goals?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 3. How would you rate the Protégés responsiveness of the recommendations you have made for improvement?  
\_\_\_ Very responsive  
\_\_\_ Somewhat Responsive  
\_\_\_ Neutral  
\_\_\_ Not very responsive. (List comments)  
\_\_\_\_\_
  
- 4. List any successes made during your time with the Protégé for the month.  
\_\_\_\_\_  
\_\_\_\_\_
  
- 5. What types of service or support have you provided the Protégé?  
\_\_\_\_\_  
\_\_\_\_\_
  
- 6. As the Oversight Committee, what can we do to assist your participation in the program?  
\_\_\_\_\_

Company Name                      Contact Person                      Phone                      Email

\_\_\_\_\_  
Signature:  
\_\_\_\_\_

**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)**  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219

## PROTÉGÉ MONTHLY FEEDBACK ANALYSIS

1. List your goals and objectives for this month.

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2. What progress have you made toward achieving your stated goals?

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3. List any successes that you've obtained (new clients, etc.).

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4. List any contracts that you've been awarded --- as a result of lessons learned from your mentor. Include the contract date, amount, contracting agency's name.

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5. What types of service or support have you been provided by your mentor?

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6. As the Oversight Committee, what can we do to assist your participation in the program?

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Company Name

Contact Person

Phone Number

Email:

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Signature:

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**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)**  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219



## Business Coaching Feedback Analysis

Business Name: \_\_\_\_\_

Protégé Name: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Date of Meeting: \_\_\_\_\_

1. What was the subject of the meeting? \_\_\_\_\_

2. How long did you meet? \_\_\_\_\_

3. Where did the meeting take place? \_\_\_\_\_

4. Were you able to provide assistance to the Protégé? \_\_\_\_ Yes \_\_\_\_ No

5. What was the outcome/result of the meeting?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Will the company need further assistance from you? \_\_\_\_ Yes \_\_\_\_ No

7. If Yes, what type of additional assistance?  
\_\_\_\_\_

8. Will you need to refer this company to another Coach for the additional assistance?  
\_\_\_\_\_

9. If so, who did you recommend? \_\_\_\_\_

Additional comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business Coach Name: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Return completed form by mail or email to [Maribel@gdhcc.com](mailto:Maribel@gdhcc.com)**  
Greater Dallas Hispanic Chamber of Commerce, Attn: Maribel De Leon  
4622 Maple Avenue, Suite 207, Dallas, TX 75219

**Protégé Business Goals for the Year**

**VISION:** What is your vision for your business?

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**MISSION:** Why is your company in business and what goods or services do you sell?

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**GOALS:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

**OBJECTIVES:**

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## **Market Program**

### **Mentoring Program Process:**

- Publicity at various events
- Identify Protégé
- Identify Needs of Protégé
- Identify Mentors and Business Coaches
- Match Mentor with Protégé in their industry
- Orientation Meeting with Mentors, Protégés and Business Coaches
- Evaluate the program on a monthly basis
- Solicit Feedback from all participants in the program
- Conclude Program
- Recognition of Mentors, Protégés, and Business Coaches at an event

### **Matching Criteria:**

- Chemistry between Mentor and Protégé
- Be cognizant of matching needs to resources
- Level of commitment from all parties
- Similar trade interest
- Identify need/Strength of resources
- Time available to participate in program

### **Metrics for Measuring Results:**

- Continuous improvement of program's goals and objectives
- Increase profitability in business (i.e. dollars, funding, customers, etc.)
- Completion of sessions/courses
- Compare the results at the end of each year to what was submitted during the application and interview process

### **Annual Evaluation of the Dallas Business Alliance Business Coaching Relationship:**

- Technical and/or management assistance provided by the Mentor and/or Business Coach to the Protégé.
- Growth of the Protégé's business growth (i.e. increased revenues, cost reductions, jobs increased)

**2011 Protégé Tracking Report**

This report must be turned in at the conclusion of the program.

<b>Date</b>	<b>EVENTS/ MEETINGS</b>	<b>Comments</b>