



School-Based Enterprise Business Proposal

DIRECTIONS: School staff are requested to thoroughly complete all sections of this fillable form. Electronic versions of this form are available at the Division of Special Education website at <https://achieve.lausd.net/Page/11792> (Employees/Forms). Please submit the completed form via school mail, email, or fax to:

<u>School Mail</u> Division of Special Education Alternate Curriculum Programs 17 th Floor, Beaudry Building Attention: Tiffany Sepe, Specialist	<u>Email</u> tiffany.sepe@lausd.net (Subject: SBE Proposal)	<u>Fax:</u> 213-241-8916 (To: Tiffany Sepe, Specialist: SBE Proposal)
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Upon receipt of your proposal, a staff member from Alternate Curriculum Programs will contact you regarding approval (including detailed information about the funding transfer), denial, or to discuss revisions that may be required before your proposal is accepted.

SECTION I. TEACHER/SCHOOL INFORMATION:

School Name:		Local District:	
Teacher Name:		Teacher Email Address:	
Contact Phone:		Proposal Submission Date:	

SECTION II. GUIDING QUESTIONS: (These questions should be addressed by the students.)

1. **Describe your idea for your business. What product or service will you be selling?**
2. **What will you call the business and what will the logo look like?**
3. **What need will your product or services address?**
4. **What is your business’s competitive advantage? (Why would someone buy from you instead of some other company that sells the same product?)**
5. **Who do you expect will buy this product?**



6. What do you expect to be your individual cost and selling price?

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7. Where and when do you plan to sell the product or service?

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8. Do you plan to advertise your product for sale? If so, what is your advertising plan?

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9. Describe the various roles the students have in this business.

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10. Identify 3 standards (ELA/math, vocational, etc.) your students will be working on through this School-Based Enterprise (Use the Unique Learning System Common Core Aligned Standards available at: <https://www.n2y.com/products/unique/>)

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SECTION III. FINAL CHECKLIST:

Please take the following action prior to submitting your proposal and indicate completion of these items by filling in the check box:

Teacher has contacted the principal (or designee) regarding:

	YES	NO
Business Proposal		
School Budget		
Contact with Cafeteria Manager (if Proposal includes Food Item)		

Principal/Designee Signature:	
Principal/Designee Name (Printed)	
Title:	
Date:	