



NORTH CAROLINA COMMUNITY COLLEGE SYSTEM

R. Scott Ralls, Ph.D.

President

September 19, 2014

MEMORANDUM

TO: Presidents

FROM: Dr. George Millsaps
State Director, Small Business Center Network

RE: Shift from Colleague (Ellucian) to the SBCN CMS for SBC seminar/workshop reporting

Upon recommendation of the SBCN and with the support of the North Carolina Association of Community College Presidents (NCACCP), Small Business Centers are no longer required to enter SBC seminar/workshop data in Colleague (Ellucian). Instead, small business center directors and staff will enter all SBC seminar/workshop data in the SBCN Client Management System (CMS). This is an important and needed change for the Small Business Center Network.

Several important points regarding this transition:

- Effective August 1, 2014, all SBC seminar/workshop data will be entered into the SBCN Client Management System.
- SBC Directors and Administrative Assistants were trained on the system prior to July 1, 2014, and additional training for individuals entering registration data and/or local internal auditors was held in July, 2014. Videos of the training are available through the SBC. Additional regional based training was held in August 2014.
- Colleges will continue to use Colleague for all budget FTE generating classes/sources, including those partially supported by SBC funds.
- SBCs will use the SBCN CMS seminar/workshop data for all System Office annual reports for FY 2014-2015.
- SBCs will continue to provide seminar/workshop attendees the opportunity to evaluate all offerings. The SBCN CMS survey tool is the preferred method of evaluation; however, equivalent local alternatives are acceptable.

- State-approved budget FTE classes/courses remain eligible for inclusion in the Performance Based Allocation figures of total entrepreneurship training events and attendees. SBCs will continue to attach a Colleague report to substantiate State-approved budget FTE classes/courses.
- SBCs will use the attached procedures and forms for documenting seminars/workshops.
- These steps should enhance the ability of local college leaders to manage their SBC and ensure positive economic outcomes as a result of SBC activities.
- Additional details regarding the transition are in the attached Q&A.

If you have questions, please contact: Dr. George Millsaps at millsapsq@nccommunitycolleges.edu or 919-807-7217.

CC14-033
Email Copy

CC: Business Officers
Registrars
SBC Directors

Small Business Center Network Client Management System

Frequently Asked Questions

Q. Why are we making this change?

A. The North Carolina General Assembly and Governor expect economic impact from all Small Business Centers (SBCs); therefore, it is extremely important that the Small Business Center Network (SBCN) capture the economic impact of its programming. The SBCN has been able to capture economic impact resulting from counseling clients for some time but not for seminars/workshops. Colleague (Ellucian) does not have that capability and modifying CIS Colleague to capture economic impact would be cost prohibitive. The SBCN Client Management System (CMS) has that capability and can do so at no additional cost.

Q. Why not use both Colleague and the CMS?

A. Each SBC has very limited resources having only one full-time SBC Director and perhaps some part-time administrative support. Requiring SBC staff to enter data into two different systems could result in conflicting data and would also drain the SBC of resources that are necessary to achieve desired economic impact results.

Q. Doesn't this change "take away" oversight of the SBC from the college and make it more a "system office" function?

A. No. In fact it will provide local college leaders more pertinent information upon which to manage their SBC. College leaders will now be able to get ad hoc or regularly scheduled reports on client and seminar volumes, satisfaction, and economic impact. College leaders will then be able to start seeing the connection between the seminars/workshops they are offering and the economic impact resulting from those events.

Q. What are the "audit requirements" for the SBCN CMS?

A: Colleges are not required to, but certainly may, audit seminar/workshop files. Program auditors typically will not audit SBC seminar/workshop files but have authorization to do so. The primary audit responsibility rests with the State Director who conducts both periodic and needs-based audits. To assist colleges, the SBCN has developed a guide called "SBCN Seminar Documentation Procedures Using the Client Management System". This guide provides detailed instructions on how colleges can successfully manage SBC events.

Q. Won't colleges have to provide IT support for the SBCN CMS?

A. The SBCN CMS requires only minimal IT support from colleges, which consists of approving NCID accounts at the local college level. Remaining support is at the System Office level for structural and costs reasons.

An example comparing Colleague and NCID to the SBCN CMS may be helpful. Colleague is "hosted" at the local level, and all data resides at the local level until it is "pulled up" to be consolidated at the state (System Office) level, currently three times per year. The fact that the data is located, and software hosted, at the local level requires local support of Colleague.

Access to state level "applications", such as the SBCN CMS, are handled through a portal called NCID. Given that each of the 58 community colleges is a separate local entity, it would be inappropriate for the System Office to grant access to individuals on behalf of those local entities. Therefore, local colleges

support NCID for access approval to systems such as BEACON, the NC Department of Administration's Motor Fleet Management, and the SBCN CMS.

The SBCN CMS is a centralized web-based system accessed from the local level. All data in the SBCN CMS resides in one main database, on a single server, and is accessed by the various college-level users. Each college is assigned a separate "center" within that centralized database. This structure allows local colleges to help avoid duplicated individuals within the database. It also helps colleges work collaboratively with clients when the host SBC authorizes such access. If each college had a separate database at the local college level, expenses would increase, client/attendee duplications would greatly increase, and we would lose the ability to quickly gather information from that centralized system. Therefore, local college need not worry about additional burdens of supporting the SBCN CMS.

Q. Won't this change negatively affect our non-budget (administrative) FTE funding?

A. The System Office does not use non-budget (administrative) FTE for any funds distribution to colleges. Additionally, the System Office Finance and Operations team has confirmed that removal of SBC non-budget FTE would not change the current salary grade designation for any college presidents; however, if necessary, the non-budget FTE can be pulled from the SBCN CMS.

Q. What do we do about facilities usage report?

A. NCCCS does not use the space utilization to allocate funds to colleges. However, the System Office could add space utilization captured from the SBCN CMS to the report if a need arises. Thus, colleges need not take any action regarding facilities usage.

Q. How will we get information from the CMS and how do we manage the SBCs after this change?

A. Getting information from the CMS is easy as it has a very robust report engine. Reports on activity, economic impact and/or satisfaction can be delivered ad hoc or on a regular basis to a list of individuals by email. Robust reporting available through the CMS will help local college leaders optimize their SBC.

Q. How do we pay presenters after this change?

A. Presenters will continue to be paid through Colleague). Simply pay them as any other non-instructional individual but code the expense to an SBC instructional line.

Q. But what about individuals who have parking fines and other debt to the college?

A. State Board Code does not require colleges to verify that fees are not owed prior to an individual attending a seminar. However, as specified in the State Board Code, colleges have the option to have rules that are more stringent and could manually check to see if attendees have any outstanding debt, if desired.

Q. How do we train our employees on this new system?

A. All SBC Directors and administrative support personnel have been afforded in-person and web-based training on the SBCN CMS "events" prior to implementation. The most intensive in-person training was Spring 2014. The SBCN has also produced two videos regarding the transition. Both of these videos are available on YouTube. The software developer, CenterDynamics, also hosted a webinar in July 2014, on integrating surveys with events. This webinar was also recorded. Regionally based training on the SBCN CMS events was held in August 2014, with additional time available during those regional meetings for one-on-one instruction on the events portion of the SBCN CMS. Continuation training will be scheduled through the SBCN Professional Development Committee.

Q. Who should have access to the Client Management System?

A. Due to the highly confidential nature of the information contained within the CMS, local college exposure increases as the number of users increases. To help protect client confidentiality and college staff, colleges should ensure that all users understand and sign the SBCN Confidentiality and Conflict of Interest agreement and should limit access to only the most critical employees who work with or on behalf of SBC clients.

Q. How will client confidentiality be handled?

A. It is a local college responsibility to ensure individuals whom they recommend access to the CMS keep client information confidential. Confidential client information is excluded from the public records law. Seminar/workshop attendee information falls under the same restrictions as student data. Aggregate information, on the other hand, can be released. Colleges should ensure that only individuals working with, or on behalf of, the SBC has access to the database. Colleges should also ensure that individuals are aware they are not to share client information with anybody in the college who does not work with, or on behalf of, the SBC.

Q. How do individuals get a transcript of SBC Seminars they have attended?

A. The easiest way is for the individual to log into his/her “customer dashboard” in the CMS and print a copy of their history without any interaction with the SBC. Individuals can also have the SBC print a report that would reflect all events attended.

Q. What do we do about the State-Approved Budget FTE-Generating Entrepreneurship Programs?

A: Since state-approved budget FTE-generating entrepreneurship programs are traditional FTE-generating classes, they will remain in the Colleague system. If partially paid for through SBC funds, these events are allowable as part of the performance based allocation computations. Colleges would simply add these numbers to their seminar/workshop figures, attach the related Colleague report, and submit them with their annual reports.

Q. How will the data be backed up each day?

A. Data within the SBCN CMS is “saved” each time an individual selects “save” or when the individual moves from page to page. Data backup meets all state ITS requirements including nightly backup and redundant servers.

Q: How do we get the college staff that was entering data into Colleague to now enter data into the CMS?

A. The SBCN CMS Internal Library includes a procedure outlining the specific steps to get a person access to the SBCN CMS. The document titled, “Steps to Gain Access to the CMS” is located in the internal library under SBCN Training/CenterIC Training.

SBCN Seminar Documentation Procedures Using the Client Management System

The following seminar documentation procedural steps will be used in order to meet the internal, local college requirements for class paperwork and to also meet the audit standards of the NCCCS:

A. General

1. SBC Seminar/Workshop files and information are student records for the purposes of confidentiality and security.
2. Retain SBC Seminar/Workshop files until audited by the State Director then in accordance with the local college's file retention policy.
3. SBC Seminar/Workshop files are open for inspection and/or audit by local college and NCCCS auditors.
4. The storage location of SBC Seminar/Workshop files is at the discretion of the local college.
5. Each SBC Seminar/Workshop file is organized as follows:
(Required items are so marked. Optional items are at the discretion of the local college. On-line items may be retained on-line at the discretion of the local college)
 - a. File label:
 1. Line one.
 - a. Date of Seminar/Workshop in YYYYMMDD format. Multiple events in the same day are designated by "A", "B", "C", etc. (example: 20141225B) **(Required)**
 - b. SBCN CMS assigned seminar number **(Required)**
 2. Line two. Seminar Name **(Required)**
 3. Line three. Local college use. **(Optional)**
 - b. File inside, Left:
 1. Verified SBCN CMS Training Event Report (example: Appendix A) **(Required, on-line)** Note: Purpose of report is to provide a summary of the event after the event has been verified.
 2. Printout of SBCN CMS "View Published" page (example: Appendix B) **(Optional, on-line)** Note: Purpose of the printout is to provide local auditors a means by which to view how the event was marketed to ensure compliance with SBCN Guidelines and local directives.
 3. Copy of signed and dated Instructor Contract, (example: Appendix C); or Professional Services Agreement (example: Appendix D); or Memorandum for File stating that the session was gratis, (example: Appendix E) **(Required)** Note: Local versions are acceptable and only one is needed unless multiple forms are required locally.
 4. Seminar Information Form, with class agenda and description (locally generated form used to build the seminar in the CMS (example: Appendix F) **(Optional)** Note: This optional local form is designed to provide local colleges a means by which to document event development.

5. Other local college administrative forms. (*Optional*)
- c. File inside, Right:
1. SBCN CMS Event Report (example: Appendix G) (*Optional, on-line*) Note: Optional report allows local auditors the ability to review attendance by individual and by attending/no show.
 2. “Printable Roster Signature” Seminar sign in sheet for pre-registered attendees, signed and dated by the instructor (example: Appendix H) (*Required for pre-registrations*)
 3. SBCN CMS Signed Attendee Registration forms (Example: Appendix I) (*Required for on-site registrations*)
 4. SBCN CMS generated pre-registration forms (example: Appendix J) (*Optional, on-line*) Note: These forms allow local auditors the ability to review pre-registered individuals.
 5. SBCN CMS Verification Screen of Attendance (example: Appendix K) (*Optional, on-line*) Note: This optional screenshot can be used by local auditors to determine the final status of an event and attendees.

B. Set up seminar in the SBCN CMS

SBC Director/designee will:

1. Create the seminar/workshop within the SBCN CMS
2. Publish the seminar/workshop. (recommend 30 days prior to the event)
3. Provide seminar/workshop link(s) to the college PIO and to other marketing support entities both on campus and otherwise available to the SBC

C. Pre-registration

Seminar/Workshop attendees may:

1. Pre-register for seminar/workshop through the SBCN website or seminar/workshop links provided by the SBC/College

SBC Director/designee will:

2. Track pre-registrations by monitoring email notifications provided by the CMS and by viewing pre-registrations in the CMS
3. SBCs may manually pre-register attendees using a locally developed process. Locally developed processes must be documented in at least as much detail as this procedure.
4. SBC will pre-register the instructor as an attendee with an underscore “_” prior to the first letter of the instructor’s last name. Note: Be sure to reflect the instructor as a “no show” prior to verifying the event.

D. Attendance reminder notifications

SBC Director/designee may:

1. Send out no more than three attendance reminder emails prior to the event
2. Provide reminder calls to attendees

E. Seminar/workshop file creation and printable roster

SBC Director/designee will:

1. Create a hard copy seminar/workshop file for all SBC training events as per the General instructions
2. No earlier than 3 days prior to the training event and no later than immediately prior to the event, the SBC will remove online registration capability and print a "Printable Roster Signature" (Appendix H)

F. Seminar /workshop registration

SBC Director/designee will:

1. Ensure that all pre-registered attendees sign the "Printable Roster Signature" sheet (example: Appendix H). For the purpose of this procedure, SBC manually pre-registered attendees shall have the same signature process as attendee CMS pre-registrants.
2. Ensure that all individuals who have not pre-registered complete, and sign, the SBCN CMS generated in-seminar/workshop registration form (example: Appendix I)
3. Ensure, as much as feasible, the collection of the following data on the registration form:
 - a. Name
 - b. Address
 - c. Phone number
 - d. Email Address
 - e. Date of Birth
 - f. SSN – last four digits

Note: Attendees should be encouraged to, but are not required to, provide e-mail, date of birth, and last four of the SSN.

4. Prior to the end of the seminar/workshop, the Presider shall sign the "Printable Roster Signature" sheet beside his/her name and date the signature.

G. Seminar/workshop verification of attendance

SBC Director/designee will:

1. Using the “Printable Roster Signature” sheet to cross reference the information in the CMS, verify the attendance for the pre-registered attendees for the seminar/workshop in the CMS (example: Appendix L)
2. Reflect the instructor as a “no-show”
3. Using the signed and dated in-seminar registration forms, enter the attendee data for the designated seminar/workshop
4. When all attendees have been entered and tallied, click on the Status field to verify the seminar/workshop

H. Print Reports

SBC Director/designee will:

1. Print periodic management reports from the CMS in order to monitor seminar attendance and match to class paperwork for audit purposes. Summary and Detail reports with no personally identifiable information will be available to college leadership and may be printed on a “scheduled” or on a “by-request” basis. (examples: Appendix M and Appendix N)

NCCCS Small Business Center Network Management Training Report

Event Information

Center & Event #: 590-2014-10

Event Title	Start Date	Start Time	Program	Event Status
SBCN Registration Test Event	6/5/2014	9:00:00 AM	SBC	Verified
Site	End Date	End Time	Sub-Program	Reviewed By
NCCCS System Office	6/5/2014	12:00:00 PM	Not Set	M Hagenbuch
City, State & Zip	Sessions	Total Hours	Entry Person & Date	
Raleigh, NC 27603	1	3	M Hagenbuch on 6/5/2014 4:33:37 PM	
Event Topic	Program Format		Language	
Other	Seminar		English	

Number of Attendees

Total Attendees	In Business	Total Veterans	Minorities
4	0	1	1
	Disabled	Service Disabled Vet.	Asian
	0	0	0
	Women	Reserve/Nat. Guard	Black
	1	0	0
			Native Amer.
			0
			Pacific Island.
			1
			White
			3
			Hispanic
			0

Resources Participating

<input type="checkbox"/> SBDC	<input type="checkbox"/> Educational Institution	<input type="checkbox"/> Online Training Resource	SBA Office: None
<input type="checkbox"/> SCORE	<input type="checkbox"/> Chamber of Commerce	<input type="checkbox"/> SBA District Office	Other Govt. Agency: None
<input type="checkbox"/> WBC	<input type="checkbox"/> Trade or Professional Assoc.	<input type="checkbox"/> Native American Center	Other: None
<input type="checkbox"/> VBOC	<input type="checkbox"/> For-Profit Organization		

Attendee Fees

Fee Distribution

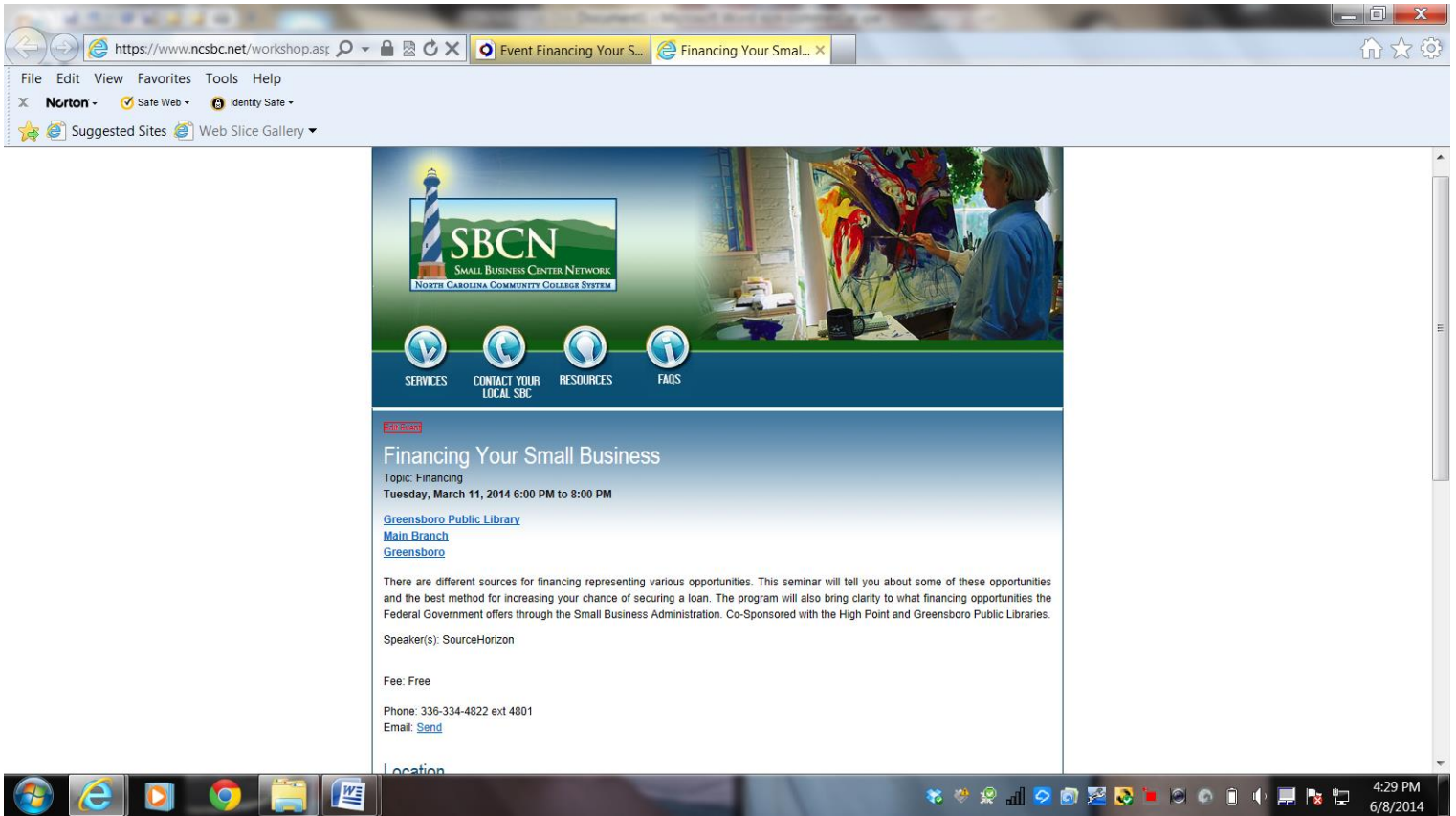
Attendee Count:	Full Fee #	Discount Fee #	No Show #	No Fee #		
	0	0	1	4	SBC	SCORE
Fee Income \$	Full Fee \$	Discount Fee \$	No Show \$		\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00		WBC	SBA
Other Income \$	Other \$			Total Fees Collected	\$0.00	\$0.00
	\$0.00			\$ 0	Co-Sponsor	Total Distribution
					\$0.00	\$ 0

Event Notes

Public Information

Standard Fee \$	Web Info: Address, Directions, URL, etc.	Misc. Public Information
\$0.00		
Alternate Fee \$		
\$0.00		

Appendix B, Screen Shot of SBCN CMS “View Published” page



ABC Community College
Instructor Contract

Instructor Name:

Print Date:

Address:

Time:

City, State, Zip

Contract:

Phone:

Seminar #:

Semester:

Seminar Title:

Seminar Hours:

Seminar Number:

Location:

Seminar Date:

Time:

Building;

Day:

Rate/Hours:

Total Payroll Amount:

Position Code:

GL Code:

Special Instructions:

This is to confirm that you have agreed to instruct the class as described above. The following conditions are agreed upon by this contract. The commitment on the part of the College is based on sufficient students for the seminar to be held. Personnel employed under this agreement do not have an expectancy of re-employment at the College. Final payment for instructional services cannot be processed until all records are completed and returned. Instructors may be required to handle books for students when appropriate.

Instructor _____ Date

Vice President _____ Date

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NORTH CAROLINA COMMUNITY COLLEGES – RALEIGH, NORTH CAROLINA
PROFESSIONAL SERVICES AGREEMENT

_____, hereinafter referred to as the Institution, and
_____, hereinafter referred to as the Contractor, enter into this agreement for professional services as described below in Item I. for the period and the daily rate of pay indicated.

I. The Contractor agrees:

A. To provide professional services as follows (fully describe the services):

B. Rate of Pay: _____ C. Amount: _____

D. Period Covered From: _____ To: _____

E. Source of Funds: _____

F. Payment of all Federal and State income taxes and Social Security applicable to the compensation received is the responsibility of the Contractor and not the Institution.

II. The Institution agrees:

A. To make payment upon completion of services rendered as provided for in Item 1-B and I-C above, and upon certification by the responsible member of management.

III. Attest:

A. Contractor _____
Name

Address: _____
Street City, State Zip

_____ Fed. I.D. # _____ Signature _____ Date

B. Institution:

1. President: _____
Name Signature Date

Local Letterhead

SAMPLE MEMORANDUM FOR FILE

FROM: Name of SBC Director

Date: Month, day, year

SUBJECT: Gratis Instruction

Instruction/facilitation of the following SBC Event was provided gratis:

Date: YYYYMMDD

SBCN CMS Number: (Insert)

Title: (Insert)

Publish Pre-Registration

Database Room Chart Master Calendar

Date Submitted: _____ Section Number: _____ Senior Admin Approval: _____

2013-2014 Seminar/Course Information Sheet

Seminar/Course Code and Number _____	Book Required? _____
Seminar/Course Title _____	Book Title: _____
Seminar/Course Hours _____	Book Price: _____
Contact or Membership Hrs. _____	Purchase book from: _____
Beginning/Ending Date _____	Purchase prior to class? _____
Instructor and SSN _____	Days/Time _____
Number of Weeks _____	Director/Coord _____
Location _____	10% Point _____
Budget Code _____	Min/Max Students _____

Method of Instruction	Info Hwy (IH)	Internet (IN)	Not App (NA)	Traditional (TR)	Telecourse (TV)		
	Cooperative Ed (CP)	Indep Study (IS)	Digital Media (DM)	Web Supp (WB)	Hybrid (HY)		Teleweb (TW)

Registration Amount for OE Courses(Check One)

1-24 hrs (\$70)	25-50 hrs (\$125)	51+ hrs (\$180)	OTHER
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Insurance Fee (check) for OE Courses

\$1.00 Accident Insurance	\$16.00 Liability Insurance
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Hourly Rate of Pay _____

Monthly Pay once at end of course

Secondary Instructor? _____

Customized Class for Employer? _____

Special Instructions: _____

Holidays/Excluded Dates: _____

<input type="checkbox"/> Class Packets	<input type="checkbox"/> Class application form to Admin.	<input type="checkbox"/> Sign-In Sheets to Admin.	<input type="checkbox"/> Attendance (W)
<input type="checkbox"/> Attendance (Y)	<input type="checkbox"/> Class Visit	<input type="checkbox"/> Evals to Instructor	<input type="checkbox"/> Evals from Instructor
<input type="text"/> Date Contract to Instructor	<input type="text"/> Date Contract Signed by Instructor		

July 2013							August 2013							September 2013							October 2013							November 2013							December 2013							
SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	
1	2	3	4	5	6					1	2	3		1	2	3	4	5	6	7				1	2	3	4	5						1	2	1	2	3	4	5	6	7
7	8	9	10	11	12	13	4	5	6	7	8	9	10	8	9	10	11	12	13	14	6	7	8	9	10	11	12	3	4	5	6	7	8	9	8	9	10	11	12	13	14	
14	15	16	17	18	19	20	11	12	13	14	15	16	17	15	16	17	18	19	20	21	13	14	15	16	17	18	19	10	11	12	13	14	15	16	15	16	17	18	19	20	21	
21	22	23	24	25	26	27	18	19	20	21	22	23	24	22	23	24	25	26	27	28	20	21	22	23	24	25	26	17	18	19	20	21	22	23	22	23	24	25	26	27	28	
28	29	30	31				25	26	27	28	29	30	31	29	30						27	28	29	30	31			24	25	26	27	28	29	30	29	30	31					
January 2014							February 2014							March 2014							April 2014							May 2014							June 2014							
SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	
			1	2	3	4						1						1				1	2	3	4	5						1	2	3	1	2	3	4	5	6	7	
5	6	7	8	9	10	11	2	3	4	5	6	7	8	2	3	4	5	6	7	8	6	7	8	9	10	11	12	4	5	6	7	8	9	10	8	9	10	11	12	13	14	
12	13	14	15	16	17	18	9	10	11	12	13	14	15	9	10	11	12	13	14	15	13	14	15	16	17	18	19	11	12	13	14	15	16	17	15	16	17	18	19	20	21	
19	20	21	22	23	24	25	16	17	18	19	20	21	22	16	17	18	19	20	21	22	20	21	22	23	24	25	26	18	19	20	21	22	23	24	22	23	24	25	26	27	28	
26	27	28	29	30	31		23	24	25	26	27	28	23	24	25	26	27	28	29	27	28	29	30				25	26	27	28	29	30	31	29	30							

Category: _____

Class Title: _____

Class Description: _____

Quick Report for Event 590340010

Events/Attendees/Fees

Created Monday, June 09, 2014 7:28:37 PM by A Shaw Reportable Centers --

Event -- SBCN Registration Test Event - 6/5/2014

Attendee	Fee	Payment Type	Payment Info	Date Paid	Deposit	Fee Type	No show
test Test	\$0.00	-				No	<input type="checkbox"/>
TEST TEST	\$0.00	-				No	<input type="checkbox"/>
MarkTest Testeroni	\$0.00	-				No	<input checked="" type="checkbox"/>
ZZTop ZZFakesystemcheck	\$0.00	-				No	<input type="checkbox"/>
Martha ZZinch	\$0.00	-				No	<input type="checkbox"/>
Grand Total							
						Total No Payment Type	\$0.00
						Total Cash	\$0.00
						Total Check	\$0.00
						Total Credit Card	\$0.00
						Total Other	\$0.00
						Total Not Yet Paid	\$0.00
						Total Fee	\$0.00

APPENDIX H, Sample Sign In Sheet

[Email Attendees \(14\)](#)
[Form per Attendee](#)
[Quick Report](#)
[Orders](#)

[+ Add Attendee](#) [# Tally](#) Show Printable Roster Signature

Present	Customer	Business	Signature
<input type="checkbox"/>	_McGimsey, Eddie	Western Piedmont CC SBC	
<input type="checkbox"/>	Adams, Duane	A-B Tech Small Business Center	
<input type="checkbox"/>	Bishop, Faye	Isothermal Community College SBC	
<input type="checkbox"/>	Branch, Robert	Mayland Community College SBC	
<input type="checkbox"/>	Gould, Kathryn	Haywood Community College, SBC	
<input type="checkbox"/>	Hartley, Regina	CCC&TI	
<input type="checkbox"/>	Heisey, Gary	Blue Ridge Community College	
<input type="checkbox"/>	Henry, Tiffany	Sothwestern Community College SBC	
<input type="checkbox"/>	Jenkins, Kathryn	Tri County Community College - SBC	
<input type="checkbox"/>	Kanipe, Dean	McDowell TCC	
<input type="checkbox"/>	Millsaps, George	NCCCS, SBCN	
<input type="checkbox"/>	Neuville, Jeffrey	CVCC Small Business Center	
<input type="checkbox"/>	Sparks, Jill	A-B Tech Small Business Center	
<input type="checkbox"/>	Strain, Bee	Cleveland Community College	

Attendee Count: 14

NCCCS Small Business Center Network Training Event Attendee

Contact Information

Client Name	Primary Phone	Office Use: _____
Position/Title (Owner, Manager, etc.)	Secondary Phone	Lead Cnslr: _____
Business Name (leave blank if none)	Fax	<input type="checkbox"/> No Mailings
Address	E-Mail Address	<input type="checkbox"/> No E-Mails
City, State & Zip	Web Site & Business Description	<input type="checkbox"/> No Public Release (to private 3rd parties if they request)
		Date of Birth: _____
		Last 4 SSN: _____

USA

Customer Information

Race	Ethnicity	Gender	Veteran	Military Status
<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific Islander	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Male	<input type="checkbox"/> Non-Veteran	<input type="checkbox"/> On Active Duty (Title 10, Title 32, SAD)
<input type="checkbox"/> Black <input type="checkbox"/> White	<input type="checkbox"/> Not Hispanic	<input type="checkbox"/> Female	<input type="checkbox"/> Veteran	<input type="checkbox"/> Member of Reserve or National Guard on Drilling Status
<input type="checkbox"/> Native American	Disability		<input type="checkbox"/> Service-Disabled Veteran	<input type="checkbox"/> Dependant of Military Member (Active, Reserve, or Guard)
	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Veteran Who is No Longer Active or Drilling

Business Information

If you are the lead representative of your business concern/venture, please provide the following information about your business:

Business Status Are you currently in business? <input type="checkbox"/> Yes <input type="checkbox"/> No (if No, skip down to Signature)	Type of Business Describe your business (e.g. Retail, Consulting, etc.) _____	Check any that apply
Employees Full Time: 0 Part Time: 0	Female Ownership Percent (0 - 100%) _____	<input type="checkbox"/> On-Line Business is Conducted
Annual Sales \$ _____	Business Start Date: _____	<input type="checkbox"/> Business is Home Based
Annual Profit/Loss \$ _____	Legal Entity _____	<input type="checkbox"/> 8(a) Certified
<input type="checkbox"/> Exporting	NAICS (if known) SIC _____ 0	<input type="checkbox"/> MatchForce
Export Employees Export Sales _____ \$ _____	DUNS 0	<input type="checkbox"/> Dislocated Worker
		<input type="checkbox"/> Bonded
		<input type="checkbox"/> COC
		<input type="checkbox"/> Import/Exporter
		<input type="checkbox"/> MBE Certified
		<input type="checkbox"/> Certified HubZone
		<input type="checkbox"/> Not a Small Business
		<input type="checkbox"/> GATE
		<input type="checkbox"/> BioBusiness
		<input type="checkbox"/> NG Ventures
		<input type="checkbox"/> Misc 10
		<input type="checkbox"/> Contracting Potential

Event Attendance (Office Use Only)

Title of Seminar Goes Here (mm/dd/yyyy)

Fee	Payment	Referral From	<input type="checkbox"/> Pre-Registered
<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> No Show
<input type="checkbox"/> Full	<input type="checkbox"/> Cash	Payment Info	
<input type="checkbox"/> Discount	<input type="checkbox"/> Check	Payment Date	
\$ 0.00	<input type="checkbox"/> Credit Card	Deposit Number	
	<input type="checkbox"/> Other		
	<input type="checkbox"/> Not yet Paid		

Signature: _____

Date: _____

NCCCS Small Business Center Network Training Event Attendee

Contact Information

Center - Customer: 120-4264

Client Name TEST TEST	Primary Phone (704) 555-5555	Office Use: Lead Cnstr:
Position/Title (Owner, Manager, etc.)	Secondary Phone	<input type="checkbox"/> No Mailings
Business Name (leave blank if none)	Fax	<input type="checkbox"/> No E-Mails
Address 111	E-Mail Address test@test.com	<input checked="" type="checkbox"/> No Public Release (to private 3rd parties if they request)
City, State & Zip Monroe, NC 28110	Web Site & Business Description not	
<input checked="" type="checkbox"/> USA		

Customer Information

Race <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native American	<input type="checkbox"/> Hawaiian/Pacific Islander <input checked="" type="checkbox"/> White	Ethnicity <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Not Hispanic	Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Veteran Veteran	Military Status Not Military
Disability <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

Business Information

If you are the lead representative of your business concern/venture, please provide the following information about your business:

Business Status	Type of Business	Check any that apply
Employees Full Time: 0 Part Time: 0	Female Ownership Percent (0 - 100%) Business Start Date:	<input type="checkbox"/> On-Line Business Is Conducted <input type="checkbox"/> Business Is Home Based <input type="checkbox"/> 8(a) Certified <input type="checkbox"/> MatchForce <input type="checkbox"/> Dislocated Worker <input type="checkbox"/> Bonded <input type="checkbox"/> COC <input type="checkbox"/> Import/Exporter <input type="checkbox"/> MBE Certified <input type="checkbox"/> Certified HubZone <input type="checkbox"/> Not a Small Business <input type="checkbox"/> GATE <input type="checkbox"/> BioBusiness <input type="checkbox"/> NG Ventures <input type="checkbox"/> Misc 10 <input checked="" type="checkbox"/> Contracting Potential
Annual Sales \$	Annual Profit/Loss \$	
<input type="checkbox"/> Exporting	Legal Entity	
Export Employees	Export Sales	NAICS (if known)
		SIC 0
	DUNS 0	

Event Attendance (Office Use Only)

SBCN Registration Test Event (7/1/2014)

Fee <input checked="" type="checkbox"/> None <input type="checkbox"/> Full <input type="checkbox"/> Discount \$ 0.00	Payment <input checked="" type="checkbox"/> None <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other <input type="checkbox"/> Not yet Paid	Payment Info Payment Date Deposit Number	Referral From Notes	<input checked="" type="checkbox"/> Pre-Registered <input type="checkbox"/> No Show
---	--	---	--------------------------------------	--

APPENDIX K, Sample Verification of Attendance in CMS (screen shot)

CenterIC Customers Events Staff Reports Center EX Help | Sign Out

SBCN Registration Test Event - 6/5/2014
NCCCS System Office

Training Event Staff Participation Attendees Publish Verified

Title: SBCN Registration Test Event
 Site: NCCCS System Office
 City: Raleigh State: NC Zip Code: 27603 District: 0
 Start Date: 6/5/2014 Start Time: 9:00 AM
 End Date: 6/5/2014 End Time: 12:00 PM
 Sessions: 1 Total Hours: 3
 Program: SBC Sub Program: (select)
 Entered by M Hagenbuch on 6/5/14 4:33 PM
 Last Edit by M Hagenbuch on 6/9/14 5:47 PM
 Status: Verified
 Verified by M Hagenbuch
 Save Delete Download Print Send Link Template Event

Topic: Other Program Format: Seminar Language: English Evaluated

Number of Attendees
 Total: 4
 Currently In Business: 0
 People with Disabilities: 0
 Women: 1
 Total Veterans: 1
 Service Disabled Vet: 0
 Reserve/Natl Guard: 0
 Minorities: 1
 Asian: 0
 Black: 0
 Native American/Alaska Native: 0
 Native Hawaiian/Pacific Islands: 1
 White: 3
 Hispanic: 0

Resources Participating
 SBDC Educational Institution Online Training Resource
 SCORE Chamber of Commerce SBA District Office
 WBC Trade or Professional Assoc. Native American Center
 VBOC For-Profit Organization
 SBA Office: None Other Govt. Agency: None Other: None

Attendee Fees
 Full Fee: 0 Discount: 0 No Show: 1 No Fee: 4
 Fee Income \$: 0
 Other Income \$: 0
 Total Fees \$0
 Fee Distribution
 SBDC: 0 SCORE: 0
 WBC: 0 SBA: 0
 Co-Sponsor: 0
 Total Dist.: \$0

Event Notes

Publish Settings

Center IC © 2001-14, Center Dynamics USA, LLC v2.12.1.2014.5.30 r.14.5.29

APPENDIX L, Sample Attendee List, Verified (screen shot)

Browser address bar: <https://www.ncsbc.net/centeric/edetail?mode=dtl&key=590340010&tab=2>

Page Title: SBCN Registration Test Event - 6/5/2014

Navigation: Customers | Events | Staff | Reports | Center EX | Help | Sign Out

Event Details: SBCN Registration Test Event - 6/5/2014
NCCCS System Office

Buttons: Training Event | Staff Participation | Attendees | Publish

Actions: Add Attendee | Tally | Show: Attendance

Summary: Attendee Count: 4 and 1 No Shows

Customer	Entered By	Fee \$	Fee Type	Payment Type	Online Payment	Online Courses	Referral From	Notes
Test, test ● CNTRAL PIEDMONT	M Hagenbuch at 6/5/14 4:35 PM	-	No Fee Pre-Registered	--				
TEST, TEST ● CNTRAL PIEDMONT	M Hagenbuch at 6/5/14 4:36 PM	-	No Fee Pre-Registered	--				
Testeronj, MarkTest ● CAPE FEAR CC	M Hagenbuch at 6/5/14 4:36 PM	-	(No Show) Pre-Registered	--				
ZZFakesystemcheck, ZZTop ● BRUNSWICK CC	M Hagenbuch at 6/5/14 4:41 PM	-	No Fee Pre-Registered	--				
ZZinch, Martha ● VANCE-GRANVILLE	M Hagenbuch at 6/9/14 5:45 PM	-	No Fee Walk-in	--				
Attendee Count: 4 and 1 No Shows			No Fee: 4 No Show: 1 for -					

Center IC © 2001-14, Center Dynamics USA, LLC v2.12.1.2014.5.30 r.14.5.29

Windows Taskbar: 7:12 PM 6/9/2014

SBCN CenterIC Event Summary Monthly

Events/General/Summary

Created Wednesday, June 11, 2014 11:13:37 AM by A Shaw Reportable Centers --

Grouped By -- Event Center,

Training Events -- Center: Is COASTALCAROLINA (140), Start Date: In Last Month, Status (Verified/Canceled): Is Verified, Event Type: Is Training,

140 East COASTALCAROLINA May 2014

<u>Events</u>	<u>Event Hours</u>	<u>Attendees</u>	<u>Training Hours</u>	<u>In Business</u>	<u>Minorities</u>	<u>Women</u>	<u>Veterans</u>	<u>Disabled</u>	<u>Total Income</u>	<u>Total Distribution</u>
13	50.50	149	581.50	17	41	79	39	5	\$0.00	\$0.00
		<u>Asian</u>	<u>Black</u>	<u>Pacific</u>	<u>Native Am.</u>	<u>White</u>	<u>Hispanic</u>	<u>Military</u>		
		2	26	1	5	94	9	1		

Grand Total

<u>Events</u>	<u>Event Hours</u>	<u>Attendees</u>	<u>Training Hours</u>	<u>In Business</u>	<u>Minorities</u>	<u>Women</u>	<u>Veterans</u>	<u>Disabled</u>	<u>Total Income</u>	<u>Total Distribution</u>
13	50.50	149	581.50	17	41	79	39	5	\$0.00	\$0.00
		<u>Asian</u>	<u>Black</u>	<u>Pacific</u>	<u>Native Am.</u>	<u>White</u>	<u>Hispanic</u>	<u>Military</u>		
		2	26	1	5	94	9	1		

SBCN CenterIC Event Details Monthly

Events/General/Details

Created Wednesday, June 11, 2014 10:48:09 AM by A Shaw Reportable Centers --

Grouped By -- Event Center,

Training Events -- Center: Is COASTALCAROLINA (140), Start Date: In Last Month, Status (Verified/Canceled): Is Verified, Event Type: Is Training,

140 East COASTALCAROLINA May2014

Event Number	Start Date	Title of Event	Program	Event		Training		In Business	Minorities	Women	Veterans	Disabled	Total Income	Total Distribution
				Hours	Attendees	Hours								
75140 -2014-67	5/1/2014	Business Basics	SBC	2.00	12	24.00		1	6	6	1	1	\$0.00	\$0.00
75140 -2014-90	5/2/2014	Entrepreneurship Pathway, MCAS	SBC	4.50	14	63.00		0	5	7	9	0	\$0.00	\$0.00
75140 -2014-69	5/6/2014	Be Free from Debt's Hold & Start a Small Business	SBC	3.00	4	12.00		0	1	3	0	0	\$0.00	\$0.00
75140 -2014-70	5/8/2014	Business Planning for Business Success	SBC	3.00	10	30.00		0	3	5	1	1	\$0.00	\$0.00
75140 -2014-68	5/9/2014	Small Business Roundtable	SBC	1.50	11	16.50		3	3	5	1	0	\$0.00	\$0.00
75140 -2014-97	5/13/2014	Entrepreneurship Pathway, MCB	SBC	6.00	13	78.00		0	1	2	12	0	\$0.00	\$0.00
75140 -2014-84	5/14/2014	Boots to Business	SBC	16.00	12	192.00		2	3	2	11	1	\$0.00	\$0.00
75140 -2014-73	5/14/2014	Small Business Roundtable	SBC	2.00	12	24.00		5	3	7	2	1	\$0.00	\$0.00
75140 -2014-71	5/14/2014	The Perfect Workday for Small Business Owners	SBC	3.00	7	21.00		2	2	6	0	0	\$0.00	\$0.00
75140 -2014-74	5/20/2014	Understanding & Controlling Cash Flow	SBC	3.00	7	21.00		0	1	4	1	0	\$0.00	\$0.00
75140 -2014-98	5/21/2014	Business Basics	SBC	2.00	30	60.00		3	9	19	1	1	\$0.00	\$0.00
75140 -2014-76	5/27/2014	Cash Flow Management	SBC	2.50	12	30.00		1	3	9	0	0	\$0.00	\$0.00
75140 -2014-75	5/28/2014	How to Do Business with the Government	SBC	2.00	5	10.00		0	1	4	0	0	\$0.00	\$0.00

140 East COASTALCAROLINA

Events	Event Hours	Attendees	Training Hours	In Business	Minorities	Women	Veterans	Disabled	Total Income	Total Distribution
13	50.50	149	581.50	17	41	79	39	5	\$0.00	\$0.00

Asian	Black	Pacific	Native Am.	White	Hispanic	Military
2	26	1	5	94	9	1

Grand Total

Events	Event Hours	Attendees	Training Hours	In Business	Minorities	Women	Veterans	Disabled	Total Income	Total Distribution
13	50.50	149	581.50	17	41	79	39	5	\$0.00	\$0.00

Asian	Black	Pacific	Native Am.	White	Hispanic	Military
2	26	1	5	94	9	1