



APPLICATION FOR ADMISSION

ABOUT THE APPLICANT

First Name _____ Last Name _____

Job Title _____ Company/ Organization _____

Company Industry (specific) _____

Company Website http:// _____

Company Mailing Address:

Number and Street/ PO BOX _____ City _____ State _____ Zip _____

Email _____

Preferred Phone
___ Office ___ Cell ___ Other () _____ Ext. _____

Please describe your marketing background.

Has your company used any marketing resources/ consultants/ etc in the past? (Circle One)
Yes No If yes, please describe briefly below.

Tricycle University

QUESTION AND ANSWER

1. If you had a million dollars to spend on marketing what would you spend it on?

2. What are you most proud of?

3. What is your brand doing that is worth talking about?

4. What do you expect from Tricycle University?

5. How will you know that Tricycle University has been a success?

Tricycle University

REFERENCES

Please provide the names and contact information of three (3) individuals that are well acquainted with you and your work. Please also include your relationship to each individual. Upon our discretion, we may decide to contact your references.

1) Name: _____ Phone: _____

Relationship: _____

2) Name: _____ Phone: _____

Relationship: _____

3) Name: _____ Phone: _____

Relationship: _____

Submit your application to Tricycle via US Mail or you may drop by our office in Downtown Boise at 615 West Hays Street.