

N Instructions for SBDC Counseling Appt

9 Steps [↗](#)

How to create an account and request an appointment for SBDC Business Counseling at the Business & Career Center on Thursdays

STEP 1

Type in First Name, Last Name, and Email Address

The screenshot displays the America's SBDC New York website. The header includes the logo and a 'Login' button. A navigation menu on the left lists 'Home', 'New Client Signup', 'Contact Us', 'Training Events', and 'Library of Documents'. A progress bar at the top shows six steps: 'Get Started' (1), 'Select Center' (2), 'User Details' (3), 'Company Details' (4), 'Agreement' (5), and 'Area of Assistance' (6). The main content area contains a message: 'Thank you for your interest in our program's services! To begin, please enter your e-mail address and name below. If you already have an eCenter login account, please enter your e-mail address and password above.' Below this is a 'New Account' form with fields for 'First name' (Winnie), 'Last name' (Siclait), 'Email' (business@bklynlibrary.org), and 'Password' (Password). A 'Submit' button is at the bottom of the form.

AMERICA'S
SBDC
NEW YORK
An Accredited Technology Program

English

Login

Home
New Client Signup
Contact Us
Training Events
Library of Documents

Get Started 1 Select Center 2 User Details 3 Company Details 4 Agreement 5 Area of Assistance 6

Thank you for your interest in our program's services! To begin, please enter your e-mail address and name below. If you already have an eCenter login account, please enter your e-mail address and password above.

New Account

First name: Winnie
Last name: Siclait
Email: business@bklynlibrary.org
Password: Password
Submit

STEP 2

Create a 12 character Password and click SUBMIT

The screenshot shows the 'America's SBDC NEW YORK' website. A navigation menu on the left includes links for Home, New Client Signup, Contact Us, Training Events, and Library of Documents. A progress bar at the top indicates six steps: 1. Get Started (active), 2. Select Center, 3. User Details, 4. Company Details, 5. Agreement, and 6. Area of Assistance. A 'Login' button is in the top right. A message states: 'Thank you for your interest in our program's services! To begin, please enter your e-mail address and name below. If you already have an eCenter login account, please enter your e-mail address and password above.' The 'New Account' form contains fields for First name (Winnie), Last name (Siclait), Email (business@bklynlibrary.org), and Password (masked with dots). The Password field is highlighted with an orange border. A green 'Submit' button is at the bottom of the form.

STEP 3

Input Relevant and/or Required Contact Information and Details and Click CONTINUE

The screenshot shows the contact information form. It includes fields for Phone Number, Work Phone Number, and Cell Phone. The 'Address' section has fields for Address (10 Grand Army Plaza), City (10 Grand Army Plz Brooklyn NY 11238), State (New York), ZIP Code, and Country (United States). The 'Details' section has dropdown menus for Gender, LGBTQ+, Race, and Veteran Status, and a text field for Additional race(s). The Address field is highlighted with an orange border. A vertical scrollbar is visible on the right side of the form.

STEP 4

Input Business Information (use your personal information if not yet available)

Training Events

My Information

My Documents

Library of Documents

Logout

Company Information

Company Status:

Not in Business

Company Name:

Winnie Siclait

Company Address

Company Address:

10 Grand Army Plaza

Company City:

Brooklyn

State:

New York

ZIP Code:

11238-5600

Country:

United States

Mailing address is the same as physical address?☒

Products/Services

Product or Service Description:

STEP 5

Type Enter product or service description here. Click CONTINUE

It helps to match you with an appropriate business counselor for your business needs.

Company City:

Brooklyn

State:

New York

ZIP Code:

11238-5600

Country:

United States

Mailing address is the same as physical address?☒

Products/Services

Product or Service Description:

Enter product or service description here. |

Other

Referral From:

(Make selection)

Referral From Description:

Continue

STEP 6

Read the disclosure, Check the box, and Type in your Full Name to CONTINUE

[Home](#)
[Contact Us](#)
[Training Events](#)
[My Information](#)
[My Documents](#)
[Library of Documents](#)
[Logout](#)

Get Started1Select Center2User Details3Company Details4Agreement5Area of Assistance6

I request management assistance from The New York State Small Business Development Center. I understand that this assistance is free of charge and that I incur no obligation to The New York SBDC or the U.S. Small Business Administration or its counselors for providing this assistance. I agree to cooperate should I be selected to participate in surveys designed to evaluate assistance services. I authorize the New York SBDC to furnish relevant information to the assigned management counselor(s) although I expect that information to be held in strict confidence to the extent allowable by law.

I further understand that any counselor has agreed not to: (1) recommend goods or services from sources in which he/she has an interest and (2) accept fees or commissions developing from this counseling relationship. In consideration of the SBDC, in cooperation with the SBA furnishing management or technical assistance, I waive all claims against The New York State SBDC, SBA, personnel or counselors arising from this assistance.

☒ I permit SBA or its agent the use of my name and address for SBA surveys and information mailings regarding SBA products and services I understand that any information disclosed will be held in strict confidence. (SBA will not provide your personal information to commercial entities.)

Please provide your full name (First, Middle, Last) indicating your acceptance to the terms shown above.

Monica Sietala

Continue

STEP 7

Check the topics you are most interested in getting assistance with.

[Documents](#)
[Logout](#)

☐ Business Plan
☐ Buy/Sell Business
☐ Cash Flow Management
☐ COVID-19 Financial/Capital
☐ COVID-19 General Support
☐ Credit Counseling or Financial Literacy
☐ Customer Relations
☐ Cybersecurity Assistance
☐ Disaster Loan Assistance
☐ eCommerce
☐ Energy
☐ Engineering R&D
☐ Financial Analysis/Cost Control
☐ Financing/Capital
☐ Franchising
☐ Government Contracting
☐ Human Resources/Managing Employees
☐ Intellectual Property
☐ International Trade
☐ Invention Assessment
☐ Inventory Control
☐ Legal Issues
☒ Managing a Business
☐ Marketing/Sales
☐ Regulatory Compliance Assistance
☐ SBIR/STTR/Other Innovation Programs
☐ Socioeconomic Certification (WOSB/VOSB/HUBZone/etc.)
☐ Start-up Assistance
☐ Tax Planning
☐ Technology/Computers
☐ Training

Please describe specific service or assistance requested:

STEP 8

VERY IMPORTANT Type in: 1. That you would like to schedule an in-person session at the Brooklyn Public Library 2. Date requested 3. What you would like assistance with

This lets the counselors know to schedule the patron for a BPL/SBDC Counseling Thursday.

☐ eCommerce
☐ Energy
☐ Engineering R&D
☐ Financial Analysis/Cost Control
☐ Financing/Capital
☐ Franchising
☐ Government Contracting
☐ Human Resources/Managing Employees
☐ Intellectual Property
☐ International Trade
☐ Invention Assessment
☐ Inventory Control
☐ Legal Issues
☒ Managing a Business
☐ Marketing/Sales
☐ Regulatory Compliance Assistance
☐ SBIR/STTR/Other Innovation Programs
☐ Socioeconomic Certification (WOSB/VOSB/HUBZone/etc.)
☒ Start-up Assistance
☐ Tax Planning
☐ Technology/Computers
☐ Training

Please describe specific service or assistance requested:

I would like an in-person session at Brooklyn Public Library on January 18, 2024.
I would like assistance with managing a start-up.

Continue

STEP 9

After clicking CONTINUE the patron should see this page and receive an automated email to the email they signed up with. A counselor will reach out and confirm their appointment date and time.

