



## PROTÉGÉ QUESTIONNAIRE

### DCMA Annual Review DoD Mentor Protégé Agreement

**(Protege Questionnaire must be returned by the deadline or it will affect the rating. Incomplete forms will be returned, therefore please answer all questions thoroughly)**

**Date:**

**Mentor Firm Name:**

**Protégé Firm Name:** \_\_\_\_\_

**Period of Performance Covered By Review:**

**Mentor Protégé Agreement Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Contract Number/Delivery order/Task Order (if Reimbursable agreement):**

\_\_\_\_\_

**Protégé Cage Code:** \_\_\_\_\_ **DUNS No:** \_\_\_\_\_

**Small Business Category:** \_\_\_\_\_

**Type of Certifications:** (SB, SDB, WOSB, SDVOSB, Hub Zone, etc.) and **Expiration dates required:** \_\_\_\_\_

Did you have any business size or small business certification updates since your last certification? \_\_\_\_\_

**List All NAICS Codes:**

- Primary:
- Secondary or Additional NAICS Codes:
- Which NAICS Code(s) is/are applicable to this agreement?
- Identify all NAICS Codes that qualify you as a large business:

**Protégé Contact Information (Name):**

**Title:**

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Type of Developmental Assistance Provided by Mentor:**

**(If answers are YES, please explain in detail what assistance/training was provided for the developmental assistance below)**

Business Infrastructure Development: Yes \_\_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Marketing Support: Yes \_\_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Manufacturing Training: Yes \_\_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Quality Training: Yes \_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Engineering/Technical Training: Yes \_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Cyber Security Training: Yes \_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Technology Transfer: Yes \_\_\_\_ No \_\_\_\_\_

Detailed Explanation:

Unreimbursed cost incurred by Protégé: Yes \_\_\_\_\_ No \_\_\_\_\_  
Detailed Explanation:

Certification/Awards Received: Yes \_\_\_ No \_\_\_ (please provide copies to DCMA PM)

Equipment Provided by Mentor: Yes \_\_\_ No \_\_\_  
Has there been government equipment or property provided to you (Protégé) by the mentor under this DoD MP Program? If so, please provide details.

New Markets Realized: Yes \_\_\_ No \_\_\_  
If so, please List and describe relationship.

Other Assistance provided not mentioned above: Yes \_\_\_ No \_\_\_  
Detailed Description:

Overall Status (health) of your MP Agreement:  
Detailed Description:

Benefits of the MP Agreement to your firm: Detailed Description:

DoD Subcontractor to Mentor: Yes \_\_\_ No \_\_\_  
Provide list of contract numbers by date and amounts (section I spreadsheet).

DoD Subcontractor to Prime Contractor Other Than Mentor: Yes \_\_\_ No \_\_\_  
Provide list of contract numbers by date and amounts (section I spreadsheet).

**Accomplishments/Milestones under the MP Agreement:**

Milestones Met: Yes \_\_\_ No \_\_\_

If answer to above question is no, do you and Mentor have a corrective action plan?  
Yes \_\_\_ No \_\_\_ If yes, provide the details of the corrective action plan.

**GROWTH**

Explain any and all Business growth and enhanced capabilities during this period of review:

Do you attribute your growth to the Mentor Protégé Agreement? Yes \_\_\_\_\_ No \_\_\_\_\_  
Explain your answer.

**Please explain in detail:**

If your answer to above statement is no, why did the Mentor Protégé Agreement not grow your business? Explain:

**Return on Investment:** Please submit back-up documents with this questionnaire (AGR verification, section I spreadsheet with employee list and prime/subcontract awards with date of award, amount & Contractor name, Services (i.e. Army, AF, Navy, etc. or Any Other Federal Agencies excluding DoD; such as DoE, VA, etc.

**(Current Annual Gross Revenue is the amount received during the BY or OYI of agreement)**

<b>Protégé Data</b>	<b>At Start of Agreement</b>	<b>This Reporting Period</b>	<b>Cumulative</b>
Employees			
Annual Gross Revenues			

<b>Protégés Actual Contracts Executed to include any delivery or task orders awarded under IDIQ:</b>	<b>At Start of Agreement</b>	<b>Contracts/ Subcontracts Awarded During Review Period</b>	<b>Cumulative from Start of Agreement</b>
<b>DoD Prime Contract Awards to Protégé</b>	\$0	\$0	\$0
<b>DoD Subcontracts from Mentor to Protégé</b>	\$0	\$0	\$0
<b>DoD Subcontracts to Protégé from All Other Sources Other than Mentor</b>	\$0	\$0	\$0
<b>DoD Subcontracts from Protégé to Mentor</b>	\$0	\$0	\$0
<b>DoD Subcontracts from Protégé to Other Than Mentor</b>	\$0	\$0	\$0
<b>Other Federal Prime Federal Contracts- All Other Federal (Excluding DoD) Prime Awards to Protégé</b>	\$0	\$0	\$0
<b>Other Federal Subcontracts- All Other Federal (Excluding DoD) Subcontract Awards to Protégé from Mentor</b>	\$0	\$0	\$0
<b>Other Federal Subcontracts - All Other Federal (Excluding DoD) Subcontract Awards to Protégé from All Sources Other than Mentor</b>	\$0	\$0	\$0
<b>Other Federal Subcontracts - All Other Federal (Excluding DoD) Subcontract Awards to Mentor from Protégé</b>	\$0	\$0	\$0
<b>Other Federal Subcontracts - All Other Federal (Excluding DoD) Subcontract Awards from Protégé to Other Than Mentor</b>	\$0	\$0	\$0

**Additional Comments/Concerns/Suggestions/Improvements to your MP Agreement and or DoD MP Program:**

**What is the Value to DoD and the War Fighter?**

NAME & Title: \_\_\_\_\_ Date: \_\_\_\_\_