# 2018 Network Connectivity PPG

**CRN's 2018 Network Connectivity Partner Program Guide Application Form**

**CRN's 2018 Network Connectivity Partner Program Guide will provide technology suppliers with the ability to highlight some of the industry's leading portfolios of telecom, cloud and connectivity offerings. The 2018 Network Connectivity Partner Programs Guide is a valuable resource for Solution Providers as it recognizes those industry players who are ready, willing and able to help partners wrap their arms around IT-Telecom convergence, and the many moving parts it entails.**

### In order to qualify for participation in the Network Connectivity Partner Program Guide, companies need to have a partner program in place for the IT channel.

**To see last year's online coverage,** [***click***](http://www.crn.com/news/networking/300081453/2016-network-connectivity-partner-programs-a-z.htm) [***here***](https://www.crn.com/news/networking/300089221/2017-network-connectivity-partner-programs.htm)**.

To view and download the entire application** [***click here***](//surveygizmolibrary.s3.amazonaws.com/library/245197/2017_Network_Connectivity_PPG_Final_doc.docx)**.

Your application must be submitted online in order for it to be accepted.

CRN’s 2018 Network Connectivity Partner Program Guide application does not need to be completed in one session. The application includes a save button that appears at the top of each page which will allow you to save your work as you go.  You will be asked to supply an email address and you will be sent a unique link that will enable you to return to the place that you left off within the application.**

 **Make sure you click the "SUBMIT" button at the bottom of the form to successfully complete your application.

-->THE DEADLINE FOR SUBMISSION IS FRIDAY, MAY 4, 11:59PM PST<--**

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### 1) ****The person filling out this form will be The Channel Company's primary contact should any questions arise.********Please enter your contact information below.****

Your First Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Title\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Organization\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Do you work for the vendor or a PR company?\*

( ) Vendor

( ) PR Company

Email Address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Extension, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of company that you will be applying for\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### 2) ****Who is the main marketing/PR contact (for award/notification purposes)?****\*

( ) I am (the person filling out this form)

( ) I would like to provide additional contact information for this person

### 3) ****Main Marketing/PR Contact (for award/notification purposes)****

Full Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address (not for publication)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number (not for publication)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extension, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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### 4) ****For the rest of this application, all questions apply to the company applying for the 2018 Network Connectivity Partner Program Guide.**** ****If you work externally, please answer for your client rather than your own company.****

Name of the company applying for the 2018 Network Connectivity Partner Program Guide\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Headquarters Street Address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address 3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### State/Province/District or Protectorate\*

( ) Alabama

( ) Alaska

( ) Alberta

( ) American Samoa

( ) Arizona

( ) Arkansas

( ) British Columbia

( ) California

( ) Colorado

( ) Connecticut

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( ) Florida

( ) Georgia

( ) Guam

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( ) Manatoba

( ) Marshall Islands

( ) Maryland

( ) Massachusetts

( ) Michigan

( ) Micronesia

( ) Minnesota

( ) Mississippi

( ) Missouri

( ) Montana

( ) Nebraska

( ) Nevada

( ) New Brunswick

( ) Newfoundland and Labrador

( ) New Hampshire

( ) New Jersey

( ) New Mexico

( ) New York

( ) North Carolina

( ) North Dakota

( ) Northern Marianas

( ) Northwest Territories

( ) Nova Scotia

( ) Nunavut

( ) Ohio

( ) Oklahoma

( ) Ontario

( ) Oregon

( ) Palau

( ) Pennsylvania

( ) Prince Edward Island

( ) Puerto Rico

( ) Quebec

( ) Rhode Island

( ) Saskatchewan

( ) South Carolina

( ) South Dakota

( ) Tennessee

( ) Texas

( ) Utah

( ) Vermont

( ) Virginia

( ) Virgin Island

( ) Washington

( ) West Virginia

( ) Wisconsin

( ) Wyoming

( ) Yukon

( ) Other

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Headquarters Phone Number\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Website URL\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Corporate Twitter Handle\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## (untitled)

### 5) ****Lead Executive Information****

Lead Executive Full Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lead Executive Title\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lead Executive Email Address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lead Executive Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lead Executive Extension, if applicable\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lead Executive Twitter handle (if different from corporate handle): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years in Position\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### 6) Please select the category that best describes your company's role in the network connectivity market.\*

( ) Service Provider (deliver carrier-class services such as Internet access, telecommunications, or managed cloud infrastructure)

( ) Master Agent/Distributor (offer services delivered by a Service Provider via a resale or agent model to solution providers)

( ) Infrastructure Provider (deliver networking, hardware, software or other technology used to support network connectivity)

### 7) Please provide a brief description of the company, focusing on what role your company plays in delivering network connectivity services and solutions through the channel (300 words max).\*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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#### 8) With which of the following Market Segment Specialization products and services is your company involved? Please check all that apply.\*

[ ] Cloud Hosting

[ ] Infrastructure-as-a-Service (IaaS)

[ ] Platform-as-a-Service (PaaS)

[ ] Internet Connectivity

[ ] Wireless/Mobility Services

[ ] Ethernet Services (dedicated and private line)

[ ] Business Communications (voice plans, SIP trunking services)

[ ] Unified Communications-as-a-Service/hosted VoIP

[ ] Networking Services (SDN, secure cloud connection services, network-based security services)

[ ] Colocation

[ ] Managed Services (PSA/IT Automation)

[ ] Managed Services Software: RMM (Remote Monitoring and Management)

[ ] Enterprise Networking Infrastructure

[ ] Network Management

[ ] Unified Communications

[ ] Video Conferencing

[ ] WAN Services (WAN Optimization, managed WAN, SD-WAN)

[ ] Other (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

## (untitled)

### 9) ****Specific Network Connectivity Channel Program Information****

Name of Channel Program\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Please list 1 to 3 of the most significant changes made to this program over the last year and describe how these changes have helped/will help your solution provider partners in the network connectivity space(300 words max)\*

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Partner Program URL\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of channel partners in this program worldwide: (If prefer not to answer, type N/A)

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of North American channel partners in the program: (If prefer not to answer, type N/A)

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Channel Chief:

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Channel Chief Title:

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Channel Chief Email (not for publication):

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Channel Chief Phone Number (not for publication):

\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Channel Program Manager\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Manager Title\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Manager Email\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Manager Phone Number (not for publication)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extension, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### 10) Channel Chief PhotoPlease upload a photo of the Channel Chief's face below (max file size 10mb).The photo must be high resolution, 300dpi JPG or TIFF. This image will be used online and in print. Editorial deadlinesprevent us from requesting an alternative photo from you, in the event that the one you are about to upload is not suitable.Once you select your photo, you must click the "upload button" in order for your photo to upload successfully.\*

\_\_\_\_\_\_\_\_1

## (untitled)

#### 11) How does this channel program ****motivate/support**** its resellers?Please check all that apply.\*

[ ] Awards for innovation

[ ] Awards for sales

[ ] Direct deposit funds

[ ] Discount promotions

[ ] Eligibility to sell vendor service

[ ] Field channel account manager coverage

[ ] Financial rewards

[ ] Incentive programs

[ ] Inside channel account manager coverage

[ ] Joint marketing planning

[ ] Low-interest financing

[ ] Loyalty programs

[ ] Marketing resources

[ ] MDF/Co-op

[ ] Online tools

[ ] Partner portal

[ ] Price protection plans

[ ] Product demo program

[ ] Qualified leads

[ ] Rebates

[ ] Referral programs

[ ] SPIFFs

[ ] Sales enablement

[ ] Tiered discounts

[ ] Training

[ ] Do not have programs in place to motivate/support our resellers

[ ] Not applicable

#### 12) Does your company offer training and/or certification aimed at helping solution providers sell services in a recurring revenue model?\*

( ) Yes

( ) No

### 13) Please describe your training/certification offering (200 word max).\*

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#### 14) Does your company offer advance commissions programs to help solution providers manage cash flow as they transition to a recurring revenue model?\*

( ) Yes

( ) No

### 15)

**Please describe your advance commissions program offering (200 words max).**

### \*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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16) How does your partner program help channel partners grow their sales of cloud-based services? \* (100 words max)

17) What percentage of your sales through the channel come from cloud services?\*

( ) zero

( ) 1% to 20%

( ) 21% to 40%

( ) 41% to 60%

( )61 % to 80%

( ) more than 80%

## (untitled)

#### 18) Which ****criteria must**** a solution provider partner meet in order to ****qualify for the minimum/basic tier**** of this partner program? Please select the criteria necessary to qualify.\*

[ ] Joint business plan

[ ] Sales/revenue volume

[ ] Certifications

[ ] Technical skills

[ ] Solutions expertise

[ ] Vertical market expertise

[ ] Specialization

[ ] Partner program does not have multiple tiers

[ ] Other (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

#### 19) Which ****criteria**** must a solution provider partner ****meet**** in order ****to move from the minimum/basic tier to the next higher tier**** of this partner program? Please select the ****criteria necessary to qualify.****\*

[ ] Joint business plan

[ ] Sales/revenue volume

[ ] Certifications

[ ] Technical skills

[ ] Solutions expertise

[ ] Vertical market expertise

[ ] Specialization

[ ] Partner program does not have multiple tiers

[ ] Other (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

## (untitled)

#### 20) Which of the following does your partner program offer to partners in an effort to help expand their businesses?\*

[ ] Business transformation training to help partners transition their business to capture more of the services market

[ ] Information to help horizontal VARs break into vertical markets (ie Healthcare)

[ ] Provide VARs with training and advice so that they better understand how they may incorporate Cloud Solutions into current offerings

[ ] Provide training in order to simplify the concept of hosted and managed services for VARs

[ ] Eligibility to sell vendor services

[ ] Technical Training

[ ] Sales training

[ ] Sales tools

[ ] Vertical market case studies

[ ] Tools to identify selling opportunities

[ ] Marketing concierge services

[ ] New hire assistance

[ ] Solutions selling

[ ] MDF

[ ] Post-sales services enablement training

[ ] Other (required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

### ****In order to submit your 2018 Network Connectivity Partner Program Guide application, you must click the "Submit" button below.********If you do not click "Submit", your application will not be submitted.****

## Thank You!

# Thank you for your application!

### Your application has been submitted. Within the next hour, you will receive a confirmation email that will include a PDF copy of your application.  The email will come from crnresearch@thechannelcompany.com.\*Please take the time to review your application once you submit it. Please note your application will be published as is. Any corrections needed after publication will be subject to a $50 administrative fee.Thank you.