

MICROGREEN CAPACITY DEVELOPMENT AND VALUE CHAIN ENHANCEMENT PROGRAMME

APPLICATION FORM

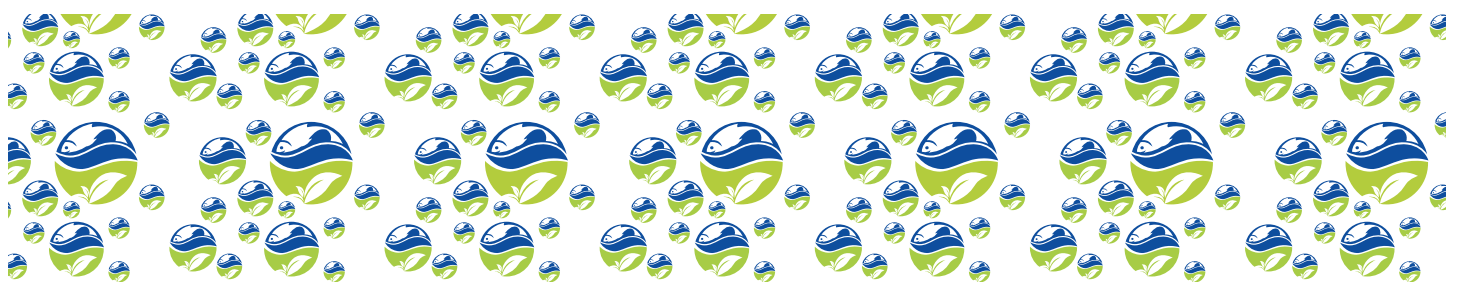
Invest in Africa (IIA) has received a grant from the African Development Bank (AfDB) to finance a project related to “Strengthening Women, Youth and People with Disabilities’ Micro-Entrepreneurship for Green Jobs in Natural Resources (MicroGREEN)” with funding source from the Fund for African Private Sector Assistance (FAPA) and Youth Entrepreneurship and Innovation Multi-Donor Trust Fund (YEI MDTF). The broad objective of this project is to strengthen the capacity of 1,000 young women, youth and persons living with disabilities (PWDs) aged 18–35 years, to take up opportunities in agroforestry, fisheries (including aquaculture) and biodiversity, and enhance business linkages in and between these sectors; in Ghana and Senegal (500 in each country).

Eligible MSMEs are hereby invited to express their interest in the programme by completing and submitting the Enterprise Data Form.

Informed Consent and Data Privacy Notice

In accordance with Sections 20 and 37 of the Data Protection Act, 2012 (Act 843), the information provided in this application form will be collected and processed solely for the purposes of administering the programme and assessing the eligibility of applicant..

By submitting this application, you consent to the collection, processing, and secure storage of your personal information for the purposes stated above. Your information will be treated confidentially and will only be accessed by authorized personnel for programme implementation and compliance with applicable laws.



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SECTION A – GENERAL INFORMATION

Name of Enterprise			
Description of Products/ Services Offered			
Sector of Operation	☐ Agroforestry ☐ Fisheries & Aquaculture ☐ Biodiversity <i>*Refer to the value chain grid</i>		
Value Chain Entry	☐ Input Supply ☐ Production ☐ Processing ☐ Distribution & Marketing <i>*Refer to the value chain grid</i>		
Physical Location (Closest Landmark)			
Region		District	
Digital Address		Town/City/Village	
Business Website			
Social Media Handles (If Applicable)	Facebook		
	Instagram		
	x		
	LinkedIn		
	Other		
Key Contact Person	Name		
	Position		
	Telephone		
	Email		

SECTION B – COMPANY STRUCTURE & OWNERSHIP

Is the Business Registered with the Registrar General's Department	☐ Yes ☐ No If Yes, Year Business Was Registered		DD MM YY YY		
Business Registration No.					
Form of Business	☐ Sole Proprietorship ☐ Partnership/Cooperative ☐ Private Limited Company ☐ Other (Specify):				
Is the Business Registered with the Tax Authority (GRA)	☐ Yes ☐ No Tax Identification No. (TIN)				
Management Team Composition	Gender	Age Category	Total No. Per Category	PWD No. Per Category	
	Male	18-35 Yrs			
	Female	18-35 Yrs			
	Total No.				
No. of Employees	Full-Time/ Permanent	Gender	Age Category	Total No. Per Category	PWD No. Per Category
		Male	18-35 Yrs		
			36+ Yrs		
		Female	18-35 Yrs		
			36+ Yrs		
	Total Full-Time Emp.				
	Part-Time/ Casual	Male	18-35 Yrs		
			36+ Yrs		
		Female	18-35 Yrs		
			36+ Yrs		
Total Part-Time Emp.					
Total Employees					

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Details of Business Promoter(s)

Promoter 1

Name	Gender	Age
	Male	18-35 Yrs ☐
		36+ Yrs ☐
	Female	18-35 Yrs ☐
		36+ Yrs ☐
Position	Ghana Card No.	
Disability Status		
☐ None ☐ Visually Impaired ☐ Hearing Impaired ☐ Mobility Impaired ☐ Other (Specify):		
Telephone 1	Telephone 2	
Email		

Promoter 2

Name	Gender	Age
	Male	18-35 Yrs ☐
		36+ Yrs ☐
	Female	18-35 Yrs ☐
		36+ Yrs ☐
Position	Ghana Card No.	
Disability Status		
☐ None ☐ Visually Impaired ☐ Hearing Impaired ☐ Mobility Impaired ☐ Other (Specify):		
Telephone 1	Telephone 2	
Email		

Promoter 3

Name	Gender	Age
	Male	18-35 Yrs ☐
		36+ Yrs ☐
	Female	18-35 Yrs ☐
		36+ Yrs ☐
Position	Ghana Card No.	
Disability Status		
☐ None ☐ Visually Impaired ☐ Hearing Impaired ☐ Mobility Impaired ☐ Other (Specify):		
Telephone 1	Telephone 2	
Email		

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SECTION C – COMMERCIAL REFERENCE & FINANCIAL INFORMATION

Business Development Stage	Seed	Business is just a thought or an idea		☐
	Growth	Business revenues and customers are increasing		☐
	Expansion	Finding new revenue and profit streams		☐
	Decline	Decreasing sales and profit, and considering shutting down		☐
	Exit	Cashing in all the effort and years of hard work		☐
Market Coverage	☐ Local (Within the immediate communities of the business) ☐ National (Across the entire country) ☐ International (Exporting to countries outside the home country)			
	How Would You Describe Your Primary Customers	☐ Individuals ☐ Small private sector companies (e.g. MSMEs) ☐ Large private sector companies (e.g. Big Hotels, Banks, etc.) ☐ Public sector institutions (e.g. MMDAs, Government Agencies, Public Schools, etc.) ☐ Other, please specify		
		☐ Less than GHS 150,000 ☐ GHS 150,000 – GHS 6,000,000 ☐ Above GHS 6,000,000		
☐ Less than GHS 150,000 ☐ GHS 150,000 – GHS 6,000,000 ☐ Above GHS 6,000,000				
Financial Institution Information (If Applicable)		Name of Primary Financial Institution:		Account Type:
				☐ Personal Account ☐ Business Account ☐ Mobile Money Wallet
Has the Business Ever Accessed Any Form of Financing?				☐ Yes ☐ No
If Yes, Provide Details	Funding Source	Year	Amount GHS	
			☐ Less than GHS 25,000 ☐ GHS 25,001 – GHS 50,000 ☐ GHS 50,001 – GHS 100,000 ☐ Above GHS 100,000	

SECTION D – OTHER

Has the Business Benefited from Any Training Programmes in the Last 24 Months?		☐ Yes ☐ No
If Yes, List Programmes Enrolled On in the Last 24 Months	Programme	Date

SECTION E – DECLARATION

I acknowledge that the information provided is accurate, true, and complete to the best of my knowledge. Any false or misleading information may lead to disqualification. Thank you.

Signature: _____ Date: