

EMERGING BUSINESS SUPPORT PROGRAMME

Intensive 2-Day Business Strategy Course

The Department of Economic Development and Tourism in partnership with the University of the Western Cape will be rolling out a programme focussing on equipping emerging small, medium and micro enterprise owners with the relevant business knowledge and skills to enhance their growth, viability and sustainability. The aim of the programme is to train 1 000 SMMEs / Business owners across the Western Cape.

The course is designed to assist business owners to adopt a strategic approach and map out a workable plan that ensures future growth and sustainability of their businesses

“Consolidate your business, identify new opportunities and develop business growth plans through an intensive business strategy training programme that will assist you to set up implementable plans for immediate execution”

Join us and be part of the experience brought to you by UWCs Centre for Entrepreneurship and Innovation (CEI) and the Western Cape Government’s Department of Economic Development and Tourism (DEDAT)

Sessions starts at 08h30 and finishes at 16h00

To participate in the programme your business:

- Should be a registered and operational business
- Should have a desire to grow and employ additional staff
- Commit to attend both days from 8h30 to 16h00

Contact: Wendy 021 959 9549 or Odette 021 483 9114

What previous business strategy programme participants said:

“The programme is a must to enable you to make a success.

“It equips you to become focused and be consistent”

“It gave me a better understanding of how to efficiently run and operate my business”

“One of the best learnings in business”

“It was practical and fun”



University of the Western Cape
Centre for Entrepreneurship and Innovation
Emerging Business – Support Programme

Intensive 2-Day Business Strategy Course

APPLICATION FORM

Please be thorough in completing this application form, as it will form the basis for selecting suitable candidates for the programme.

Once completed, please email form to wmehl@uwc.ac.za – or Fax to: 021 959 9313

A. ABOUT YOURSELF

1. Name and Surname

2. ID Number Nationality:

3. Gender Male Female Cell:

4. Classification Black Coloured White Indian Other

B. ABOUT YOUR BUSINESS

1. Registered Business Name:

2. Trading Name: Reg. No.

3. The business is a (Please **BOLD** or **X** your choice)

SOLE PROPRIETOR	CC	PTY LTD	COOPERATIVE	NPC
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4. Are you registered for Vat? Do you have a valid tax clearance certificate? YES NO

5. Bus. Physical Address

6. Email: Website:

7. Telephone No. Fax No.

8. Does the company have a formal business plan? YES / NO (Please **BOLD** or **tick** your choice)

9. How many employees (do not include yourself) Permanent full time:

Seasonal/Temp/Contract: Permanent part-time:

10. Describe the core business activity

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11. What was your per annum turnover for the last financial year: *(make an X in applicable box)*

<input type="checkbox"/>	Less than R300 000
<input type="checkbox"/>	R301 000 – R500 000
<input type="checkbox"/>	R501 000 – R1 million
<input type="checkbox"/>	R1 million – R2 million
<input type="checkbox"/>	R2 million – R5 million
<input type="checkbox"/>	R5 million – R10 million
<input type="checkbox"/>	Above R10 million

12. Sector: Place X in appropriate box

Hair Cutting / Grooming	Automotive Repair Services	Clothing Design / Tailoring	Retail Clothing / Accessories
Restaurant / Food	Manufacturing	Childcare Services	Retail Hardware
Media & Publications	Professional Services	Cleaning Services	Other Retail
Transport Services	Security Services	Entertainment Services	Agri-Processing

Other: Specify

C. TERMS AND CONDITIONS

1. By signing the application form the participant agrees to the Department of Economic Development and Tourism's monitoring and evaluation processes in which the participant agrees to disclose information such as, but not limited to, business information relating to:
 - a. Employment count in the business
 - b. Sales and turnover information
 - c. Rand value of assets in the business
 - d. The state of the business

This information is purely for statistical purposes to monitor and evaluate change and impact in the business and will only be reported in a combined statistical report that does not identify the business

2. The participant agrees to allow the Department to conduct site visits and take pictures of staff and production activities. The participant can be contacted for a period of 12 to 24 months after the intervention for further monitoring and evaluation.

DECLARATION

I declare this information to be correct and factual and that once accepted for the training programme, I will commit to attend both days and complete further data collection forms for statistical purposes

Yes I do... Signature:

Date:

Please note that all information will be treated in the strictest confidence

<p>FOR OFFICE USE</p> <p>Comments</p> <p>Approved</p> <p>Course date Area/Location</p> <p>Administrator's Signature</p>
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