

Kyambogo University Business Incubation Centre (KyU BIC)
Incubatee Application Form

Instructions

In order for your application to be reviewed for consideration, the documents listed below must be submitted. It is important that these documents be submitted as soon as possible in order for the review of your concept to begin.

Checklist

1. One Copy of your Business Plan
 2. Application Form
 3. Proof of Business Registration (if applicable)
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Section 1: GENERAL INFORMATION

Business Name: _____

Business Address: _____

Entrepreneur Name: _____

Entrepreneur Home Address: _____

Entrepreneur Contact Information _____

Entrepreneur National ID No. _____

Section II: BUSINESS DESCRIPTION

(a) Are you planning to start a business?

YES _____ NO _____

(b) Is your business:

- ___ Partnership
- ___ Sole Proprietorship
- ___ Company

(c) Starting date of your business

(d) Current number of employees: _____

(e) Briefly describe the nature of your business:

(f) What do you consider to be the three most significant factors that will affect your business in the next year?

1. _____
2. _____
3. _____

(g) Do you have a business plan? YES _____ NO _____

(h) Do you have a financial plan? YES _____ NO _____

Section III: FUNDING

(i) Are you currently seeking funding? YES _____ NO _____

(j) Please state funds needed: UGX. _____

(k) Source of funding (if any)? _____

(l) Have you ever prepared an operating budget? YES _____ NO _____

(Please enclose a copy, if available)

Section IV: MARKETING & PLANNING

1. Do you have marketing and strategic plans? YES _____ NO _____

2. Describe your products and/or services:

3. Describe the market for your product and service:

4. Who are your competitors? List top three, if known.

5. What is your competitive advantage in this industry?

6. How do you plan to market your product/service?

- _____ Online
- _____ Middle man
- _____ Direct Retailing
- _____ Sales force

7. Has a previous effort been made to sell your product/services? YES _____ NO _____

(Describe: when, where, volume sold, produced by)

_____ Printing

_____ Printing

_____ Electronic mail

_____ Electronic mail

_____ Other (specify below)

_____ Other (specify below)

4. Please indicate types of training needed:

_____ Management _____ Marketing

_____ Technical (specify) _____ Financial

5. Do you need:

_____ Conference room

_____ Multimedia

This form represents an application and a formal request to become an incubatee of the BIC. All information provided by the potential incubatee will be kept strictly confidential. No liability will be assumed by the BIC

Signature: _____ **Date:** _____

Title: _____