

## APPLICATION FORM - ADVISORY1

1 PERSONAL DETAILS						
Title (check appropriate option where applicable)	Mr.	Mrs.		Ms.		Other (specify)
Name:						
Address:	Physical address:		Postal address:			
Email address:						
Omang number:			Date of birth:			
Landline phone:			Mobile phone:			
Highest educational level (pcollege/university)	orimary/secondary/techn	ical				
Are you the only owner of the business? <i>Please circle the</i> correct answer		Yes		No		
In case you are not the only owner, how many other owners does the business have? How are they related to each other?						
Location for which you are applying		Gaborone		Francistown		

Note: Financial statements are required at time of submission. Preferably last years' financial statement or last 3 months' of (bank) statements

<sup>1</sup> Participation in Tokafala's advisory program is at no charge



2 COMPANY INFORMA	TION					
Company name:						
Company address:	Physical address:			Postal address		
Office contact number:		Fax num	ber:			
Home page:						
Industry sector:						
Date of company foundation:		<ul><li>full t per v</li><li>Part weel</li></ul>	per week)  • Part time (1-4 days per week)		# people: # people: Yes / No	
Key products and/or services offered by company (by sales volume)	1)	2)	idboi		3)	
Who are your key clients?						
Revenues (in Pula) <sup>2</sup> : Please provide supporting statements	Last month's revenues:			Revenues of th	e last 12 months:	
Who are your key competitors?						
Key sources for financing business since business was established:						

<sup>2</sup> Insight into the company's financials is needed to assess strength and size of the business. Any confidential information, financial or otherwise, will be treated as such. Tokafala will not share this data to outside parties without specific approval from the client



## 3.- BUSINESS GROWTH OPPORTUNITY How do you want to grow your business? Please explain your growth idea/project. Have you already started to implement the project? If yes, which activities have you already implemented? What is still missing? By how much do you expect revenues to increase? Have you already discussed this idea with other institutions/programs (e.g., CEDA)?



4 MOTIVATION					
Which activities have you implemented over the last year to grow your business? Max 100 words					
What would you do to grow your businesses in case you will not be selected to participate in the Tokafala Program? Max 100 words					
What has been the main difficulty in starting and develop	ng your business? How did you overcome it? Max 100				
words					
Participation in the Tokafala Program requires an investment of 10-15 hours per month. Are you willing to commit to this time investment for the next 4 months? <i>Please circle your answer.</i>					
Yes	No				
Have you participated in other programs that provide support to micro and small enterprises (e.g., CEDA, LEA, Youth Development Fund)? If yes, please specify which programs you have attended and which support you have received.					



5 SKILL-SET Please circle the appropriate answer		
Do you know how to use email?	Yes	No
Do you know how to use the internet to search for information?	Yes	No
Can you write a letter using Word?	Yes	No
Do you know how to use the basic calculation functions in Excel (add, subtract, multiply, divide)?	Yes	No
Have you developed a Business Plan or Strategic Plan for your business?	Yes	No
Do you know the costs for your key products/services? Do you record them?	Yes	No
	Yes	No
Do you record your sales and expenses? If yes, how?		
	Yes	No
Do you use an electronic accounting system? If yes, which one?		
Do you have a bank account in your name that you use for your business?	Yes	No
Do you have a bank account in your company's name?	Yes	No
	Yes	No
Do you currently have a loan for financing business activities? If yes, which organization finances you?		
Date Sign	ature	

Completed forms and financials can be submitted in one of the following ways:

- Drop off at the Tokafala office, 3<sup>rd</sup> floor, Standard House, Main Mall, Gaborone
- Per e-mail to tokafala@tns.org
- Per mail, to postal address PO box 726AAH, Gaborone (please take delay of delivery into account)