**APPLICATION FORM**

**FOR**

**BUSINESS DEVELOPMENT SERVICE PROVIDERS**

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| --- | --- |
| Application Number {For Official use only} |  |

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| --- | --- |
| **Date of Application**  |  |

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| --- | --- |
| **1.0 APPLICANT INFORMATION**  |  |
| **1.1 Name of Applicant** |  |
| * 1. Legal Form of Applicant (e.g. Limited Company, Individual etc.)
 |  |
| * 1. Registration/Identification Number
 |  |
| * 1. ZRA Tax Payer Identification Number (TPIN)
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| * 1. Province
 |  |  | Street Address & Plot No. (Business Premises) |  |
| * 1. District
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| **1.3 Authorized Representatives (Provide two Names)** |
| **1. Name of Contact Person** |
| Position in the Business |  |
| Contact Number(s) | Cell:  | Telephone: |
| Email |  |
| Physical Address ( Residential Address) |  |
| **2. Name of Contact Person** |
| Position in the Business |  |
| Contact Number(s) | Cell:  | Telephone: |
| Email |  |
| Physical Address (Residential Address) |  |

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| **2.0 BUSINESS INFORMATION**  |
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| 1. Date business was formally established:
 |  |
| 1. For how long have you been providing BDS
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| 1. Are you are certified BDSP (Yes/No)
 |  |
| 1. If Yes, please attach the certificates
 |  |

1. . Indicate the type of Business Development Services you offer in the table below

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| --- | --- | --- | --- |
| **No** | **Type of BDS** | **Duration (days)** | **Cost of BDS**  |
| 1 | Business Management Skills |  |  |
| 2 | Entrepreneurship Skills Training  |  |  |
| 3 | Online Business to Business Trading Platform development |  |  |
| 4 | Monitoring and Evaluation |  |  |
| 5 | Any other BDS services that you offer |  |  |

1. Specify the Province you prefer to be considered

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| **3.0 MANAGEMENT TEAM** |
| *[Applicant to indicate names, positions, qualifications and relevant experience of key members of the management team that will be providing BDS]*  |
| **No.** | **Full Name** | **Management Position** | **Management Qualification and Experience** |
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| **7.0 CHECKLISTOF DOCUMENTS TO ATTACH ( Please check and tick all the necessary documents that must be submitted) [√]** |
| Letter of Application |  |
|  Company Profile  |  |
| Technical proposal on how the proposed interventions will be delivered  |  |
|  List of at least three (3) relevant case studies undertaken in the past three years and at least three (3) written references from reputable organizations and companies.  |  |
|  Certificate of Incorporation and / or Registration of Business issued  |  |
| Register of shareholders or an equivalent for companies registered outside Zambia (*For companies)* |  |
| Certified copy of identity document(s)/ Passports for shareholder(s).  |  |
| CVs of all key resources persons |  |