

**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) | | |  | | |
| * 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** |
| |  |  | | --- | --- | | 1. Date business was formally established: |  | | 1. For how long have you been providing BDS |  | | 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  |  |  |  |  | | --- | --- | --- | --- | | **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 |  |