



## APPLICATION FOR TECHNICAL ASSISTANCE

PLEASE COMPLETE FULLY

### PART I: CONTACT DETAILS

<b>1. Client Name:</b>		<b>2. Type of Client:</b> <input type="checkbox"/> Face to Face <input type="checkbox"/> Online <input type="checkbox"/> Telephone		
<b>3. Business/Trading Name:</b>				
<b>4. Telephone#</b>		<b>Mobile:</b>		<b>Work:</b>
<b>5. Email Address:</b>		<b>6. Website Address:</b>		
<b>7. Street Address/PO Box:</b>				
<b>8. City/Parish:</b>	<b>9. State:</b>	<b>10. Zip:</b>	<b>11. Country:</b>	

### PART II: BUSINESS DETAILS

<b>12. Is the Business in Operation?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>13. Date Incorporated /Registered:</b>	<b>14. Incorporation/Registration #:</b>	<b>15. Annual Sales:</b>
<b>16. Total No. of Full-time Employees:</b>	<b>17. Month &amp; Year Business Started:</b>	<b>18. Proposed Start Date (if not operating):</b>	
<b>19. Form of Business</b> <input type="checkbox"/> Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/> Non-Profit Organisation	<b>20. Size of Business (tick one):</b> <input type="checkbox"/> Micro enterprise (less than 5 employees; less than EC\$75,000 in annual sales) <input type="checkbox"/> Small enterprise (5 – 25 employees; EC\$75,000 – EC\$300,000 in annual sales) <input type="checkbox"/> Medium enterprise (25 – 50 employees; EC\$300,000 – EC\$2,000,000 in annual sales) <input type="checkbox"/> Large enterprise (over 50 employees; over EC\$2,000,000 in annual sales)		
<b>21. Nature of Operation (tick relevant category)</b>			
<b>Sectors</b>		<b>Sub-sectors</b>	
<input type="checkbox"/> Tourism	<input type="checkbox"/> Hotels	<input type="checkbox"/> Restaurants	
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Villas	<input type="checkbox"/> Marinas	
<input type="checkbox"/> Other services	<input type="checkbox"/> Condominiums / Time Share Property	<input type="checkbox"/> Attractions	
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Film, film strips, video and sound recording	<input type="checkbox"/> Handicraft	
<input type="checkbox"/> Retail and Wholesale	<input type="checkbox"/> Publishing and Printing	<input type="checkbox"/> Agro – Processing	
	<input type="checkbox"/> ICT	<input type="checkbox"/> Light Manufacturing	
	<input type="checkbox"/> Offshore Financial Services	<input type="checkbox"/> Education & Training	
	<input type="checkbox"/> Health Care Facility	<input type="checkbox"/> Laundry/dry cleaning	
	<input type="checkbox"/> Recreation, Sports Entertainment, Culture	<input type="checkbox"/> Machine shop	
	<input type="checkbox"/> Forestry	<input type="checkbox"/> Television and Radio Broadcasting	
	<input type="checkbox"/> Spice Farming	<input type="checkbox"/> Transportation	
	<input type="checkbox"/> Herbs Farming	<input type="checkbox"/> Horticulture	
	<input type="checkbox"/> Organic Farming	<input type="checkbox"/> Aquaculture	
	<input type="checkbox"/> Fishing and Shrimping	<input type="checkbox"/> Apiary culture	
	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Hydroponics	
		<input type="checkbox"/> Animal Husbandry	

### PART III: SERVICE(S) REQUIRED

<b>22. What is the Assistance Required?</b>			
<input type="checkbox"/> Business Start-up Advice	<input type="checkbox"/> Business Plan Development	<input type="checkbox"/> Bookkeeping/ Record keeping	
<input type="checkbox"/> Business Counseling and Mentoring	<input type="checkbox"/> Proposal Development	<input type="checkbox"/> Research and Information	
<input type="checkbox"/> Business Diagnostic	<input type="checkbox"/> Training (specify).....	<input type="checkbox"/> Other.....	
<input type="checkbox"/> Business Name Registration/Amendment	<input type="checkbox"/> Costing and Pricing of products/Services		
<b>23. Are you able to pay for the assistance required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>24. What or who inspired you to contact GIDC? (tick all that apply)</b>			
<input type="checkbox"/> GIDC Client	<input type="checkbox"/> Chamber of Commerce	<input type="checkbox"/> Flyer/Brochure/Poster	<input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> Magazine	<input type="checkbox"/> Educational Institution	<input type="checkbox"/> GIDC website	
<input type="checkbox"/> Financial Institution	<input type="checkbox"/> Internet	<input type="checkbox"/> Ministry of _____	
<input type="checkbox"/> Television/Radio	<input type="checkbox"/> Newspaper		



## APPLICATION FOR TECHNICAL ASSISTANCE

### CLIENT WAIVER

I hereby request **technical assistance service** from the Grenada Investment Development Corporation (GIDC). I agree to cooperate should I be selected to participate in surveys designed to evaluate GIDC's services. I permit the GIDC or its agent the use of my name and address for GIDC surveys and information mailings regarding GIDC products and services. I understand that any information disclosed will be held in strict confidence. I hereby authorize GIDC to furnish relevant information to the assigned Counselor(s), Specialist or Consultant for service delivery. I further understand that the Counselor(s), Specialist or Consultant agrees not to:

- a. Provide my personal information to commercial entities or any other party without my consent
- b. Recommend the delivery of support services from sources in which he/she has an interest, and
- c. Accept commissions for services delivered by the Corporation

In consideration of the Counselor(s), Specialist or Consultant breach of the above conditions, I waive all claims against GIDC personnel, and that of its Resource Partners and host organizations.

**Client Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### INSTRUCTIONS:

*Applications should be forwarded to:*

Senior Vice President, Business Development  
Grenada Investment Development Corporation  
Frequente Industrial Park, Frequente, St. George

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### FOR OFFICIAL USE

**Application Completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Specialist to whom Assigned:** \_\_\_\_\_

**Date Application Assigned:** \_\_\_\_\_

**Signature Senior VP-Business Development:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

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