

YOUNG ENTREPRENEURS GRANT APPLICATION FORM

SECTION A: PERSONAL INFORMATION

All fields need to be completed in order to submit this form

Name (Given names and Last name): _____

Date of Birth (YYYY/MM/DD): _____

Are you between 18 and 29 years of age? Yes No

Preferred Pronouns: she/her he/him they/them other: _____

Address: _____

City: _____ Postal Code: _____

Phone (Home): _____ Phone (Cell): _____

Personal email: _____ Business email: _____

Citizenship Status: Canadian Citizen Permanent Resident Other

Social Media Accounts: _____

Current Education Status:

Highest level completed: _____ Year Completed: _____

Area of Study: _____

How did you find out about the Young Entrepreneurs Grant?

The following information is collected for statistical purposes only

Indigenous Status: Not Declared Inuit Métis Non-Status Status

Status – On Reserve Status – Off Reserve None

Disability: Yes No Not Declared

Visible Minority: Yes No Not Declared

Immigrant/Refugee: Yes No Not Declared

Landing Date (year only): _____

SECTION B: EMPLOYMENT INFORMATION

Current Student/Employment Status (check all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Not a student | <input type="checkbox"/> Unemployed | <input type="checkbox"/> Farming |
| <input type="checkbox"/> Full-time student | <input type="checkbox"/> Self-Employed Full-time | <input type="checkbox"/> Employed Full-time |
| <input type="checkbox"/> Part-time student | <input type="checkbox"/> Self-Employed Part time | <input type="checkbox"/> Employed Part-time |

Your current or most recent employment

Company Name: _____ Employed from: _____

Address: _____ Job Title: _____

Responsibilities: _____

SECTION C: BUSINESS INFORMATION

Legal name of proposed business: _____

Operating name (if different): _____

Business Address: _____

City/Town: _____ Postal Code: _____

Is the business currently in operation? Yes No

If **No**, please provide the following:

Proposed start date: _____

Proposed Product or Service: _____

If **Yes**, please indicate the following:

(Note: Businesses that have been in operation longer than 12 months from application date are ineligible)

Start Date: _____ Business #: _____

Product or Service: _____

What is the structure of the business?

- Sole Proprietorship Partnership Corporation or Limited Company

If that business is to be a **PARTNERSHIP** or **LIMITED COMPANY**, please include the name(s) and ages of ALL business partners/investors/shareholders and their position(s) with the company. Copies of partnership agreements or articles of incorporation must be submitted with your application.

Note: Partners and investors are NOT required to meet program age requirements

Name: _____ Position in Company: _____

Name: _____ Position in Company: _____

Name: _____ Position in Company: _____

Have you applied to any other government program for funding? (ex: Business Start; Futurpreneur; Rural Entrepreneur Assistance?)

No Yes

Program name and status of application: _____

SECTION D: FINANCIAL INFORMATION

Provide an estimate of the business start up costs for the first 12 months of operation

Note: a more detailed financial analysis MUST be included with your Business Plan

What are the estimated General Start-up Expenditures?	
Cost Category	Amount
Rent	
Licenses/Permits	
Advertising	
Office Supplies	
Loan Interest	
Employee wages and benefits	
Utilities	
Legal and financing fees	
Inventory costs	
Equipment Rental	
Other (specify)	
TOTAL START UP COSTS	

What are the estimated Capital Expenditures?	
Cost Category	Amount
Land/Building	
Equipment	
Store/Business furniture	
Vehicles	
Other (specify)	
TOTAL CAPITAL EXPENDITURES	

Based on the total **START UP** and **CAPITAL** costs listed above, what is the amount of grant support you are seeking from the Young Entrepreneurs Grant program?

Total Grant Amount Requested (maximum \$10,000): _____

APPLICANTS MUST CONTRIBUTE A MINIMUM OF 25% TO THE OVERALL COSTS OF THE BUSINESS START-UP

Personal Assets and Liabilities

Please provide details of your current personal financial situation

(as of the date of application to the Young Entrepreneurs Grant program)

What are your CURRENT ASSETS?	
Cost Category	Amount
Cash	
Liquid Assets (stocks, bonds, etc.)	
Real Estate	
Name of registered owner:	
Vehicles	
Name of registered owner:	
Other (specify):	
TOTAL CURRENT ASSETS	

What are your LIABILITIES?	
Cost Category	Amount
Mortgage(s)	
Credit Cards	
Loans	
Other (specify)	
TOTAL LIABILITIES	

SECTION F: CERTIFICATION

I, _____, hereby declare that I am the Applicant, or the authorized representative of the Applicant business, named in the Personal and Business Information Section of the Young Entrepreneurs Application form.

I certify that I have read and agree to the criteria, terms, conditions and requirements of this application form.

I certify that all of the information given by me in this application is true and complete. I authorize the officers of the program to make all necessary credit investigations and provide the Partners with Youth program office with any relevant information. I have included with this application the business description, for which I am requesting program assistance. I understand that this and any subsequent information submitted by me and approved under Partners with Youth become part of this application.

I understand that upon arrival of this application, I agree to permit the program to audit the records of the business during the first year of operation.

I understand that upon arrival of this application, the individual named in the Personal and Business Information Section of the Young Entrepreneurs Application undertakes to comply with all the conditions as set out in this application.

I understand that if the Applicant named in the Personal and Business Information Section fails to meet with any or all of the terms and conditions as set out in this application or has provided false/incomplete information to the Young Entrepreneurs Grant Program, the Applicant, shall, upon request by the Government of Manitoba, be required to repay all funds paid to the Applicant.

Name of Applicant or Representative: _____

Position with Business: _____ Telephone #: _____

Address: _____ Email: _____

Signature: _____ Date: _____

SECTION C: BUSINESS PLAN OVERVIEW AND CHECKLIST

To help you ensure that all required aspects of a business plan have been included, the Young Entrepreneurs Program has provided an overview checklist for your reference. Please ensure that the business plan you submit includes all the following data. Remember to cite sources that support your statements about competition and market trends.

For more information about how to create a business plan, visit the Futurpreneur online Business Plan Writer at: <https://www.futurpreneur.ca/en/bplan/>

Executive Summary/Business Overview

- Have you determined what form of business structure your venture will take? (sole proprietorship, partnership, limited corporation, or cooperative)
- Have you completed an implementation plan/schedule with dates?
- Have you registered your business with the Companies Office?

Marketing Section

- Have you identified current industry trends?
- Have you identified your major competitors and detailed their strengths and weaknesses?
 - How long have they been in operation?
 - Where are they located and what products and services do they offer?
 - Have you considered the difference between direct and indirect competition?
- Have you identified your target market (who are your customers and where are they located)?
- What is the estimated size of your market in terms of territory?
 - Type of customer and consumer?
 - Price ranges for your product/service?
 - Have you quantified the size of the opportunity locally, provincially, nationally, and globally (if applicable)?
- Have you compiled your demographic information?
- Why will customers prefer your product/service to that of your competitors? (It is not enough to state that you will provide “better service”)
- Please provide the results of the research (surveys and other quantifiable data) conducted that supports these assumptions about your customer base.
- What forms of advertising, promotion, and publicity do you plan to use to market your business? Please detail all related costs.
- What amount do you plan to spend on advertising, promotion, and publicity for your first twelve months of operations?

Operations and Management Section

- Have you listed your major suppliers (locations and services/products offered) and their credit terms?
 - Can you change suppliers easily if required?
- What are your overhead costs (rent, utilities, taxes, licenses and permits, maintenance, equipment and machinery, vehicle, etc.) that will be factored into your product or service pricing in order to cover general operating expenses?
- Have you made any provisions for warranty/servicing costs in your pricing?
- What is the average cost per unit for your product/service including all labour and other related overhead costs?
- Identify your facility requirements as to the size, location and type of premises.
 - Will your venture be home-based?
- Are there any special skills required to operate your business venture?
- Have you considered additional training or supports you might need to help you and your business to succeed? (i.e. courses in accounting, management, marketing, IT, business advisors, etc.)
- Are patents, franchise obligations and agreements, trademarks and licensing agreements relevant to your business venture? If they are, have you considered the financial implications?

Please note the following questions are related specifically to those ventures that are involved with manufacturing:

- What are the materials that will be used to manufacture your product or provide your service?
- What is the average cost of these materials?
- What is the average labour cost required to manufacture your products or provide your service?

Financial Section

- Have you calculated your break-even point?
- Have you included notes to financials in this section?
- Have you completed a pro-forma cash flow forecast for **Year One** and **Year Two** of operations?
- Research data and general assumptions used to determine your cash flow projections (what was the logic based on when you determined your sales projections?).
- Have you completed an Income Statement and Balance Sheet for **Year One** and **Year Two**?
- Have you completed a Profit and Loss Statement?
- Detailed your banking expenses and any other expenses related to financial and professional services used by your business (accountant, lawyer, architect, etc.)?

- Have you made provisions to provide yourself with a suitable salary or monthly draw (owner/personal draw)?
- Have you identified all costs, operating and capital, associated with the start-up of your business venture?
- Have you identified all assets and equity that will be used to start your business venture?
- Have you identified all sources of financing for your business venture?

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

This personal information is being collected under the authority of Youth Partnerships as part of Manitoba Economic Development, Investment, Trade, and Natural Resources. The information will be used and may be shared with Youth Partnerships partners for the purpose of determining eligibility for the program, monitoring and accountability requirements, as well as research and evaluation purposes. These partners include Entrepreneurship Manitoba. As well, this information may be used to contact you in the future for follow-up and evaluation purposes. This personal information is protected by the Protection of Privacy provisions of **The Freedom of Information and Protection of Privacy Act**. If you have any questions about the collection and use of this information, contact YouthPartnerships@gov.mb.ca.

I consent to the collection, use, and disclosure of personal information as outlined above.

Signature

Date