



MENTOR APPLICATION FORM

DATE OF APPLICATION:

COMPANY DETAILS

Company Name

.....

Company Registration number

Postal address

Physical address

Telephone number Fax number

Email

Bank name

Bank branch

Bank account number

Any Current Loans with CEDA or MBF

.....
.....
.....

Areas able to operate in

.....
.....
.....

Contact person details:

Name & Surname

Physical addresses

.....

Postal addresses

.....

Telephone number Cell phone number

Fax number E-mail

Role of Contact person in company.....

COMPANY DIRECTORS DETAILS:

1) Name & Surname:

.....

Identity number / Passport number

.....

Nationality of individual (Local or Foreign)

.....

Physical addresses

.....

Postal addresses

.....

Telephone number Cell phone number

Fax number

Email

Status of employment

.....

2) Name & Surname:

.....

Identity number / Passport number

.....

Nationality of individual (Local or Foreign)

.....

Physical addresses

.....

Postal addresses

.....

Telephone number Cell phone number

Fax number

Email

Status of employment

KEY MENTORS, INCLUDING RESOURCE PERSONNEL DETAILS:

1) Name & Surname

Identity or passport number

Qualifications

Area of specialization

2) Name & Surname

Identity or passport number

Qualifications

Area of specialization

3) Name & Surname

Identity or passport number

Qualifications

Area of specialization

4) Name & Surname

Identity or passport number

Qualifications

Area of specialization

EXPERIENCE:

HAVE YOU APPLIED FOR CEDA MENTORING BEFORE? (if yes which year?)

.....

HAVE YOU BEEN ACCREDITED AS A CEDA MENTOR BEFORE? (if yes which year?)

.....

Any Accreditation to a Professional Body. (if yes which year?)

.....

How many years has the company and the personnel been in the related field in entrepreneurial development:

.....
.....
.....

What is your understanding of the Entrepreneurial Development?

.....
.....
.....

Previous institutional training jobs (excluding CEDA): company, year, training conducted

.....
.....
.....
.....
.....

Previous CEDA training assignments

.....
.....
.....
.....
.....

MENTORING PROGRAMMES

CEDA has 5 project life cycles for mentoring: pre-appraisal, implementation, problematic- non paying and paying, additional funding and need based. Based on these life cycles, what mentoring strategy do you plan to use?

.....

.....
.....
.....
.....

Please state the expected impact which could be derived from your Mentoring Programme.

.....
.....
.....
.....
.....

REFEREES:

1. Company name

.....

Company registration number

Contact person name & surname

Contact person physical addresses

Contact person postal addresses

Contact person telephone number

Contact person fax number

Contact person cell number

Contact person email

2. Company name

.....

Company registration number

Contact person name & surname

Contact person physical addresses

Contact person postal addresses

Contact person telephone number

Contact person fax number

Contact person cell number

Contact person email

3. Company name

.....

Company registration number

Contact person name & surname

Contact person physical addresses

Contact person postal addresses

Contact person telephone number

Contact person fax number

Contact person cell number

Contact person email

Please submit together with this form, the company profile and the CVs of all the key people and the training manuals. CEDA reserves the right to reject your application at its discretion.