



BizStart

Youth Entrepreneurship Program

2016/2017 Application Form

Application Deadline: May 24th, 2016

Section 1: Contact Information *[Please PRINT clearly]*

Name:

Address:

Postal Code:

Home Phone:

Apt:

City:

Cell Phone:

Which telephone will accept a confidential voicemail?

E-mail address:

Have you ever used the services of Youth Employment Services (YES)?

If yes, who was your Counsellor?

How did you find out about this program?

Preferred language of communication:

English French Other



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Section 2: About You

1. Date of Birth: [Year] [Month] [Day]

Social Insurance Number: - -

2. Please attach a **copy of your resume** to this application. (2 pages max.)

3. Please list two references, such as a former employer, a teacher, mentor, group leader, agency counselor, religious advisor or similar. No friends or family.

Reference # 1: Name:

Organization:

Telephone:

Reference # 2: Name:

Organization:

Telephone:

4. What computer skills do you have?

- None
- Word processing
- Internet and e-mail
- Excel
- Microsoft Word
- Microsoft Office (Outlook, Access, PowerPoint)

- Adobe, PageMaker or other design software
- HTML programming
- Basic programming
- Advanced design skills (DreamWeaver, Flash technology, etc.)



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5. Please check the boxes that apply to you:

- I am between the age of 15 and 30. My exact age today is:
- I am currently unemployed.
- I am currently employed.
 - If you are employed, how many hours do you work per week?
 - What is your current job title?
- I am **not** currently enrolled in school full-time.
- I am **not** currently collecting Employment Insurance Benefits (EI).
- I have **not** received Employment Insurance Benefits in the past three years.
- I have **not** received Maternity Benefits in the past three years.
- I am **not** currently receiving Social Assistance.
- I am **not** currently receiving Workers Compensation.
- I am a single parent.
- My Citizenship Status is:
 - Canadian Citizen
 - Landed Immigrant
 - Refugee Claimant
- My last level of education obtained is:
- Are you enrolled in any other government agency or program at this time?
 - If yes, which one(s):
- If accepted into this program, I am available to work on my business full time Monday to Fridays inclusive for a minimum of 30 hours per week from 10:00 a.m. to 4:00 p.m., for 6 months, beginning in June 2016.

Do you belong to any of the following groups (optional)?

- Aboriginal Canadian
- Visible Minority
- Persons with Disability
- Other:

6. Do you currently have any Credit Card or Bank Debt or outstanding Student Loans? How much?



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SECTION 3: About Your Business Idea

8. If you have a business idea, please describe it within 30 words or less (*For example: "My business will be a **Graphic Design company** serving pet stores in Toronto."*)

9. Please indicate any steps you have already taken to become Self-employed:

- Have you registered your business; date?
- Have you registered for GST?
- Have you started a business plan?
- Have you completed a business plan?
If have a business plan, please attach it to the application
- Have you partnered with someone in your business?
- Do you have your debt under control, and are you making regular payment arrangements or through a credit-counselling agency.
- Have you sold products or services already?
- Have you purchased or obtained your own computer or equipment?
- Have you set up a dedicated workspace at home or elsewhere?
- Have you saved some money? Amount:
- Have you borrowed some money for my business? Amount:
- Have you purchased a dedicated telephone number for your business, or plan to use your cell phone?
- Have you previously owned a small business?
- Other steps you have taken, if any:

10. Please attach a typed letter to answer each of the following questions.

*(Please Note: one paragraph for each question, maximum of 100 words per question, **No more than 2 pages for all questions.**)*

- a) Why do you want to start your own business?
- b) Why do you feel that you will be successful with your own business?
- c) Does your background experience or education support your business?
- d) What entrepreneurial skills, qualities or attributes do you possess?
- e) Why do you feel you need this program?
- f) What has been your biggest obstacle professionally or personally, and how have you overcome it, or how do you plan to?





SECTION 4: Declaration and Consent

By signing below, I declare that all information above is accurate and correct. I authorize the release and disclosure, now, and in the future, of the information contained within this application to representatives from Human Resources and Skills Development Canada and to Youth Employment Services YES for reporting and fundraising purposes.

I also authorize YES to contact my references listed. If accepted into the program, I understand I will be asked to enter into a performance contract with Youth Employment Services YES.

Applicant's Signature:

Date:

THANK YOU for applying to the Youth Entrepreneurship Program. Youth Employment Services cannot guarantee the acceptance of any application, nor does it assume any liability for declining any application. **PLEASE NOTE THAT ONLY ACCEPTED CANDIDATES WILL BE CONTACTED via telephone.*

**** Don't forget to attach your Resume and your typed answers to Question # 10.**

(Office Use Only):

- Application is [] complete or [] incomplete.
- Application meets eligibility criteria? _____
- Application to proceed to Phase 2
 - Yes; notified on _____
 - No; notified on _____

Application reviewed by: _____



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