







MSME ACCERELATOR APPLICATION FORM

Declaration of consent

SECTION 1: GENERAL INFORMATION

I consent to submit my data to the MSME ACCERATOR PROGRAMME by completing and submitting the application form

Applicant's full name
Position in the business of applicant
Applicant's phone number SECTION 2: BUSINESS INFORMATION
Name of the business for which you are submitting an application
District in which the business is located
Physical address of business
Business phone number(s)
Business email address
Name of business owner (If different from applicant)
Sex of business owner Male Female
Age of business owner. Tick, as required. □ 18-30 yrs □ 30-50 yrs □ Above 50 yrs



□ No







Does the business owner own or manage more than one business? ☐ Yes ☐ No
SECTION 3: ELIGIBILITY
Is your business operational in the following target districts: Kampala Mukono Jinja Masaka Soroti Lira Mubende Hoima
Does the business have 1 or more women as managers (CEO/COO) Yes No Is the business engaged in one or more of these sectors? Agribusiness Trade/Commerce Manufacturing ICT Building and construction Healthcare Education Tourism Green sectors Others.
If other, please explain below
Has your business been in operation for at least 1 years? Yes No Does your business have a turnover of at least UGX 20,000,000? Yes
 □ No Is your business willing to participate in the Accelerator for at least one year? □ Yes