

BIT number: 1 /



Bright Ideas Trust

Application Form

Section 1 – Personal Details

| | |
|--|----------------------------|
| First Name: | Surname: |
| Home address and postcode: | |
| London | |
| Please note that at this time we will not consider applications from people outside of London. | |
| Phone (home): | National Insurance Number: |
| Phone (mobile): | Email address: |
| Date of birth: / / Please note that we will not consider applications from people who are under 16 and who are over 30. | |

Where did you hear about the Bright Ideas Trust?

Section 2 – Who is applying?

Please tick the appropriate box

Just me Me and other people

If you are applying as part of a team describe the group and your role within it.

Please tell us about your background, including education, previous employment and/ or business start up experience.

Section 3 – Tell us about your business idea.
Please give us a brief description of your business idea.

Who will be your main customers?

How do you know that there is a need or demand for your business idea?

How will you tell potential customers about your business?

What skills do you have to make your idea a success?

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What skills do you think you will need to your business idea a reality?

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|--|
| |
|--|

Please tell us how much money you need to start your business and what you think you will need it for

| Item | Amount needed |
|-------------|----------------------|
| | £ |
| | £ |
| | £ |
| | £ |
| | £ |
| | £ |
| | £ |
| Total | £ |

Of the amount above how much will you be able to provide yourself?

| | |
|--|---|
| | £ |
|--|---|

Section 4 – References

Please provide the names and addresses of two referees. Referees should know you and support your project idea. They can be a community worker, a doctor or someone else who has an important position within the community. If you are applying as part of a group, your referees should be people who know all the members of your group.

Referee 1

| | |
|---------------------------|----------------|
| First Name: | Surname: |
| Job Title: | |
| Home address and postcode | |
| | |
| | |
| Phone (home): | Email address: |

Referee 2

| | |
|---------------------------|----------------|
| First Name: | Surname: |
| Job Title: | |
| Home address and postcode | |
| | |
| | |
| Phone (home): | Email address: |

Section 5 – Declaration

I confirm that, as far as I know, all the information on this application form is true and correct. I understand that you may ask for more information at any stage of the application process or when the business is up and running.

| | |
|----------------|-------------------|
| Your Signature | Date: / / |
|----------------|-------------------|

Data Protection Act 1998

The Bright Ideas Trust and the Bright Ideas Social Enterprise Community Interest Company collect and share elements of this information with other organisations for research, educational, training, administrative and funding purposes, and to ensure that the Trust complies with regulations and required standards. Statistics will be gathered to monitor provision and to plan future provision. We do not trade or share our mailing lists with any other body.

From time to time reports, newsletters and other material may be sent to you. If you do not want to be contacted for these purposes please tick this box.

Please post completed forms to: Bright Ideas Trust, Waterfront Studios Unit G39, 1 Dock Road London E16 1AG.