

## Business Application Form

Contact Details:	Prof / Dr / Mr / Mrs / Miss / Ms	
Name		
Business Name		
Position Held		
Town		
Postcode		Tel No
Email/Website		

• **Application criteria requires businesses to be VAT registered with turnover of £64K+**

• **What is your company's present trading situation?**

Date Started trading: \_\_\_\_\_ Current Year's Turnover: \_\_\_\_\_ Next Year's Forecast: \_\_\_\_\_

No. Yrs in Business: \_\_\_\_\_ Current Year's Employees: \_\_\_\_\_

### Industry Sector

- |                                 |                          |   |                          |
|---------------------------------|--------------------------|---|--------------------------|
| Agriculture, Hunting & Forestry | <input type="checkbox"/> | Hotel & Restaurants                           | <input type="checkbox"/> |
| Fishing                         | <input type="checkbox"/> | Transport, Storage & Communication            | <input type="checkbox"/> |
| Mining & Quarrying              | <input type="checkbox"/> | Financial Intermediation                      | <input type="checkbox"/> |
| Manufacturing                   | <input type="checkbox"/> | Real Estate, Renting & Business Activities    | <input type="checkbox"/> |
| Electricity, Gas & Water Supply | <input type="checkbox"/> | Public Administration & Defence               | <input type="checkbox"/> |
| Construction                    | <input type="checkbox"/> | Education                                     | <input type="checkbox"/> |
| Wholesale & Retail trade        | <input type="checkbox"/> | Health & Social Work                          | <input type="checkbox"/> |
| Professional Services           | <input type="checkbox"/> | Other Community, Social & Personal Activities | <input type="checkbox"/> |

### Specify your main business activity:

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**In signing this documentation I agree to contact the appointed Mentor & meet with them on a regular basis.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Data Protection** – Business Mentoring will use the information, which you provide on this form, to assess your requirements within the Business Mentoring programme. We would like to keep a record of your information in case other opportunities or information in relation to our services or those of the Scottish Enterprise Network arise in the future which we think may interest you.

If you do not wish us to do this, or contact you about these then please tick this box.

We will use your information for personnel administration and management purposes, including carrying out appropriate checks and marketing. We may need to share your information for these purposes with our associated companies, Local Enterprise Trusts, our agents and the Scottish Enterprise Network. We would also like to use your information to help us identify services, which associated companies, the Scottish Enterprise Network or Business Mentoring may offer and which may be of interest to you.

If you do not want to be contacted (either by mail, telephone or e-mail) with details of services please tick this box.

You have a right to ask for a copy of the information we hold on you and which is subject to the Data Protection Act 1998, (for which we may make a small charge) and to correct any inaccuracies in your information.