

2017 MICROFINANCE AWARDS YOUNG MICRO ENTREPRENEUR NOMINATION FORM

Guidelines

- I. We encourage the Service Providers to nominate individual Micro Entrepreneurs. Please complete the required information below and provide supporting documents to make a strong case for the business that you seek to nominate for the Award.
- II. Entrepreneurs are to be between the ages of 15-35.
- III. Please address your queries to duri@rbf.gov.fj and akata@rbf.gov.fj

PART A: ABOUT THE NOMINATING MICROFINANCE SERVICE PROVIDER

| Name and Address | of the Institution | branch where | nominee is | associated with: |
|------------------------|------------------------|---------------------|-----------------|------------------|
| Address of head office | ə: | | | |
| Name of credit officer | of the nominee: | | | |
| Telephone No.: | Fax No.: | | | |
| Mobile No.: | Email Address: | | | |
| PART B: ABOUT T | HE NOMINEE | | | |
| Name of the Nominee | : | | | |
| Age: | Gender: Femal | e Male | | |
| Home Address: | | | | |
| Business Address: | | | | |
| Telephone No.: | | Mobile No.: | | |
| PART C: LOAN STA | ATUS OF THE NON | MINEE | | |
| Number of years nomi | inee has been a client | of the institution: | | |
| Number of loans obtain | | | | |
| Amount of principal le | oans obtained by the r | nominee | | |
| (Please only include p | rincipal amount for th | he first loan and t | he last 3 loans | s only) |
| Loan Cycle | Month/Yea | r of Release | Principal 1 | Loan Amount |
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How will you describe the repayment record of the nominee on previous and current loans? (*Please provide a document that will show the nominees repayment records*).



| PART D: ABOUT THE BUSINESS Describe the nature of the business(es) the nominee is engaged in: |
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| Date of establishment: |
| State the current market value of the asset of the business(es): |
| (Please provide list of assets on the attached pro-forma table) |
| How many people does the business employ (please include paid family members)? |
| State the average annual sales of the business(es): |
| < \$15,000 \$15,000 - \$30,000 \$15,000 |
| State the annual average profit of the business(es): |
| < \$15,000 \$15,000 - \$30,000 |
| State portion of annual profit reinvested in the business(es): |
| < 10% |
| State amount of savings of the business(es): |
| < \$5,000 \$5,000 - \$10,000 > \$10,000 |
| Explain actions taken by the nominee to sustain the business(es)/Business Plan: |
| |
| |
| Does the client keep records of cash flows? (Please provide evidence) |
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| Explain if the nominee has a clear and definite plan to expand the business(es): |
| |



| Does the business use raw materials that are also sourced from r Does the business have a product that is used as a material for community? | another business in the |
|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| State evidence of local talent (creativity) associated within the busine | |
| | |
| Print Name and Signature: | |
| Name of Manager or CEO: | |
| Name of Nominee: | |
| Signature: Date: | |

Note:

1. Please submit together with this nomination form a short write-up and a picture of the nominee and his/her business(es).



NOMINEE'S BUSINESS ASSETS

| BUSINESS 1: | | | |
|---------------|--------------|--|--|
| <u>Assets</u> | Market Value | | |
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| BUSINESS 2: | | | |
| Assets | Market Value | | |
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| BUSINESS 3: | | | |
| Assets | Market Value | | |
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