**UNITED STATES AFRICAN DEVELOPMENT FOUNDATION**

**AFRICAN WOMEN ENTREPRENEURS PROGRAM- REIMAGINED**

**(AWEP-R)**

**GRANT APPLICATION**

**DEADLINE: January 21, 2024, 6:00 PM (EST)**

**Small and Medium Enterprise Grant Application**

***PART 1: OVERVIEW***

|  |  |
| --- | --- |
| **Name:** |  |
| **Applicant’s Position/Title:** |  |
| **Venture Name:** |  |
| **Physical Address of Venture** |  |
| **Full Mailing Address of Venture** |  |
| **City/Town/Village of Residence:**  |  |
| **Constituency:** |  |
| **Region:** |  |
| **Email Address:** |  |
| **Sector:** **(Please select one category; if your primary sector isn’t listed, please write it beside other)** | **Agribusiness-☐ Health-☐ Tech-☐ Finance-☐ Retail-☐ Environmental-☐** **Handicrafts-☐ Fashion-☐** **Other:** |
| **Status of your company:** **(Select the definitions below)** | **Start-up ☐ Early Stage ☐ Expansion ☐** |
| **Grant Amount Requested** | **Local Currency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ US $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Status of your company:** * ***Start-up:*** *You are not selling a product or service. You do not have customers who pay you for your work. You are not operating your business.*
* ***Early stage:*** *You are selling a product or service. You have customers who pay you for your work. You are operating your business. You have been doing so for less than 1 year.*
* ***Expansion:*** *You are selling a product or service. You have customers who pay you for your work. You are operating your business. You have been doing so for more than 1 year. With this grant, you are expanding into a new line of business/new product or service offering.*
 |
| **Date of business registration:** |  | **UEI Number:** |
| **Registration number:** |  |
| **Business type per registration:** |  |
| **Date of business commencement:**  |  |
| **Owners & Directors** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Name* | *Nationality* | *Verification document**(document type)* | *% of shares (if applicable)* | *Home address* |
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*Add more lines on a separate sheet as necessary* |
| **Are any owners, Directors, Staff, or employees former AWEP participants?** (For information purposes only; does NOT impact your eligibility) |  |
| **Are you a member of the AWEP Alumni chapter?** (For information purposes only; does NOT impact your eligibility) |  |

*Text in italics (including this) can be deleted as you complete the USADF Application. Suggested: (1) Use font size 11 for your answers, not smaller. (2) Use black font color and standard text – NO italics.*

***PART 2:* VENTURE INFORMATION**

1. **Vision Statement** for your venture (250 characters or fewer)**:**
2. **History:** (250 words or fewer) *Why did you begin your enterprise? What has led you to this point in time? Tell us about successes, revenues, and/or how much has been invested in your company, and the track record of your accomplishments from the last three years.*
3. **What are or what will be the primary products and/or services you will provide?** (200 words or fewer)

***PART 3: YOUR Proposal***

1. **Problem:**(200 words or less) *What is the problem? Where is it located? Who are you reaching? (Be specific, such as the # of farmers in your area (name your country, state and/or county) NOT the 5 million people in your country with a plot of land). How many people will you impact (directly and indirectly)? Be realistic; this is a 2-year grant term.*

*Example (1): Plantain farmers in Namibia lose 40% of their produce on the side of the road; 300 farmers in Tamale surveyed grow and harvest an estimated 10,000 tons annually, but only sell 6,000 tons. The rest sit and rots, as there are not enough buyers nor storage facilities to absorb the supply.*

*Develop your problem further, with data and context.*

1. **Solution:** (200 words or less) *What is your solution? How are you tackling the problem? What are you going to do about it? What is innovative about your approach? What impact do you hope to achieve for the wider community that the proposed project grant will contribute to? What is your goal on a macro level? Describe the market opportunity for your service or product.*

*Example (2): If the problem is a 40% achievement gap in rural school children (as compared to urban) and causes include poor teacher quality and low textbook access, then your solution may be to increase digital content on the tablets that the state-run primary schools are providing already. Running a pilot amongst 350 students in 2 schools in 2 towns (identify them) in grade 5 (a critical year for advancement) will test this theory. That will empower students to educate themselves, to learn how to learn, and to improve educational outcomes.*

1. **Expected Outcomes:** (200 words or less). Bulleted answers are preferred.

*What calculable results will the project achieve for the target customers, suppliers, and/or other beneficiaries? What will the development impact be? How will you measure success? Provide at least 2 tangible measures that you can count on.*

*Examples:*

* *XYZ agribusiness will utilize new food processing and packaging equipment to increase production by 25%, from 40 tons of (product) to 50 tons.*
* *300 plantain farmers in northern Namibia will increase their incomes by 33%, from $2.50 a day to $3.75, by selling 50% of their crops to the applicant’s agribusiness company.*
* *300 farmers will be trained in best practices for irrigation, composting, and mulching, to reduce their cost of commercial fertilizers by 20%.*
1. **Work Plan**

*Please provide a workplan of* ***key******activities*** *for your business. What do you need to do to ensure your business is best suited for success?*

***PART 4: VENTURE DETAILS***

1. **Employees and Beneficiaries**

*Please fill out the section below as it currently relates to your venture. For the baseline year, only count your current employees and beneficiaries, not your intended numbers. Then provide projections for the next three years.*

**Employees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Baseline** | **Year 1** | **Year 2** | **Year 3** |
| **Number of full-time employees** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Number of part-time employees** |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Number of Customers or Beneficiaries** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** | **Male** | **Female** | **Total** |
| **Target Customer (check all that apply):** | Rural [ ]  Urban [ ]  Peri-Urban [ ]  |

**B. FINANCIAL AND ADMINISTRATIVE SYSTEMS**

1. Does your organization or enterprise have a trained accountant or bookkeeper? Yes/No

What are their qualifications and years of experience?

2. Does your organization or enterprise have two years of financial statements? Yes/No

Are the statements audited?

3. Does your organization or enterprise have written operating procedures (human resources and financial management)?

**C. CURRENT FINANCIAL SITUATION**

**A. List the major assets owned by the venture and the corresponding value if known (such as money in the bank, credit owed by buyers, equipment, building, land, etc.). Add additional lines/sheets as needed.**

|  |  |
| --- | --- |
| **Asset Type** | **Value** |
|  |  |
|  |  |

**B. List any loans (amounts, term, provider), and other liabilities attached to the organization?**

|  |  |  |
| --- | --- | --- |
| **Loan Type** | **Value** | **Balance Due** |
|   |   |   |
|  |  |  |

**C. List all sources, amounts, and dates of any donor, government or other outside funding received. Have you requested any other funding (grants or loans) support from other donors, NGOs, government, private companies, or banks that are still being considered? If yes, please list details (Name of donor, date of decision, type, amount). This *will not disqualify any applicant.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Donor Name** | **Date** | **Type (Loan / Grant)** | **Value** |
|  |  |  |  |
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**D. After the USADF grant has ended, if your organization needs further funding for working capital or expansion, where do you expect to seek loans or other sources of funding?  If you do not, why not?  List the name(s) of credible\* potential follow-on financing organizations you have identified.  Follow-on financing means financing that you apply for and receive during or after the USADF grant. \*Credible means you have contacted the source of financing and understand the requirements to obtain financing from this source. Limit response to one paragraph.**

**E. Financial Estimates**

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| --- | --- | --- | --- | --- | --- | --- |
| Please provide indicative values, based on your own prior experience, and projections for the next three years. Revenues *(based on initial assumptions for types of customers, service units and pricing)* | ***Indicative Category*** | ***Previous Year (Base -1)2022*** | ***Current Year (Base)2023*** | ***Year 1*** | ***Year 2*** | ***Year 3*** |
| *e.g. Service fees* |  |  |  |  |  |
| *Usage fees* |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| ***TOTAL*** |  |  |  |  |  |
|  |  |  |
| Cost of Goods *(please indicate categories and forecasts for recurring operating costs; please include labor costs and any other relevant costs)* | ***Indicative Category*** | ***Previous Year (Base -1)*** | ***Current Year (Base)*** | ***Year 1*** | ***Year 2*** | ***Year 3*** |
| *Raw materials* |  |  |  |  |  |
| *Production/labor* |  |  |  |  |  |
| *Other production costs* |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| ***TOTAL*** |  |  |  |  |  |
|  |  |  |
| Gross Margin (*Revenues - Cost of Goods )* |  | ***Previous Year (Base -1)*** | ***Current Year (Base)*** | ***Year 1*** | ***Year 2*** | ***Year 3*** |
|  |  |  |  |  |
| Overhead costs: Salaries (non-production staff).  |  |  |  |  |  |  |
| Other overhead costs |  |  |  |  |  |  |
| Net Income *(Net profit before tax and depreciation)* |  | ***Previous Year (Base -1)*** | ***Current Year (Base)*** | ***Year 1*** | ***Year 2*** | ***Year 3*** |
|  |  |  |  |  |
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1. **Past Performance References**

**Please provide contact information for three references. References should be from outside of your organization and should be familiar with the activities of your organization. (Required)**

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| --- | --- | --- | --- |
| Name | Relationship | Telephone | E-mail |
|  |  |  |  |
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**AWEP-R PROJECT BUDGET TEMPLATE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   |   | **Name of Project**  |   |   |
|   |  | **Costs** |   |
|   | **Category** | **Description** | **in Local Currency** |   |
|   | **A** | **INFRASTRUCTURE**  |   |   |
|   | A.1 |   |   |   |
|   | A.2 |   |   |   |
|  |  |  |  |  |
|  |  | **Sub-Total** |  |  |
|   | **B** | **EQUIPMENT**  |  |   |
|   | B.1 |  |  |   |
|  | B.2 |  |  |  |
|  |  |  |  |  |
|   |   |  **Sub-Total** |  |   |
|   | **C** | **WORKING CAPITAL / INPUTS** |  |   |
|   | C.1 |  |  |   |
|   | C.2 |  |  |   |
|  |  |  |  |  |
|  |  | **Sub-Total** |  |  |
|   | **D** | **TRAINING**  |  |   |
|   | D.1 |   |  |   |
|   | D.2 |   |  |   |
|  |  |  |  |  |
|  |  | **Sub-Total** |  |  |
|   | **E** | **TECHNICAL ASSISTANCE** |  |   |
|   | E.1 |  |  |   |
|  | E.2 |  |  |  |
|  |  |  |  |  |
|   |   |  **Sub-Total** |  |   |
|   | **F** | **ADMINISTRATIVE SUPPORT** |  |   |
|   | F.1 |   |  |   |
|   | F.2 |   |  |   |
|  |  |  |  |  |
|   |  |  **Sub-Total** |  |   |
|  |  | **Grand Total *(not to exceed USD 100,000)*** |  |  |