

CALL FOR APPLICATIONS MPUMALANGA YOUTH DEVELOPMENT FUND

The Office of the Premier of Mpumalanga call on interested young entrepreneurs to apply for the roll out of the 2023 Mpumalanga Youth Development Fund (MYDF). The fund is aimed at assisting deserving young people aged 18-35 years from Mpumalanga Province to kick-start and or expand their business ventures.

The MYDF has entered its third year of the three years piloting phase which stands as a grant to deserving and qualifying 100% youth-owned entities. Potential candidates should ensure that their application is in a form of *a sound business plan* accompanied by the following returnable documents:

- Certified ID Copy
- Curriculum Vitae (with supporting documents of qualifications)
- Proof of Residence
- Company Registration Documents
- Valid SARS Tax Pin
- BEE certificate (CIPC or Sworn Affidavit)
- Proof of active business bank account
- Proof of market / offtake agreements.

Applications should be submitted in a *form* which is accessible on *www.mpumalanga.gov.za*.

Enquiries should be directed to Mr. SB Ntandane: 013 766 2108/2006 or via email MYDF@mpg.gov.za

NB: V Faxed or emailed applications WILL NOT be accepted.

Beneficiaries of the MYDF ARE NOT encouraged to re-apply.

√ Late applications WILL NOT be considered.

√ Youth with Disabilities are encouraged to apply.

Kindly forward your applications to:

The Manager - Youth Development, for the attention of Mr. SB Ntandane,

Private Bag X11291, Mbombela, 1200.

Physical Address: Office of the Premier, Makhonjwa Building, First Floor, Riverside Park, Government Boulevard, Mbombela.

Closing Date: 24th February 2023 at 16h00

If no correspondence is received within four months after the closing date, applicants must accept that their applications have been unsuccessful.







2023 APPLICATION FORM

MPUMALANGA YOUTH DEVELOPMENT FUND (MYDF)

SECTION A										
BUSINESS DETAILS										
Surname of Applicant:										
Full Names of Appl	icant:									
Age of Applicant:										
Gender	MALE	FEMALE	OTHE	R	Disability Status	YES	NO			
Name of Entity:										
Registration Number of Business Entity:										
Position/Role in relation to the Applicant:										
ID no of individual representing the Business Entity:										
E-mail:										
Tel: Cell 1:				Cell 2:						
Business Physical Address:										
City/Town: Province:										
District Municipality					Local Municipality:					
Country:				Ward Number:						
SECTION B										
FUNDING INFORMATION										
Total Grant Required from Youth Fund:				□ R						



Initials:

Owner/s Contributions or other funding received or applied to the Business:													
R				_		N	ame:						
R				_		N	Name:						
R				_		N	Name:						
R				_		N	Name:						
R				_		N	Name:						
1. Do you have an existing business that is currently in operation? 2. Have you ever received any Entrepreneurship Development Training? 3. Do you have an existing loan or received funding in the past 12 months? If yes please provide funding details below.													
Job creation information													
How many current jobs and/or jobs do you intend to create? Before Funding After Funding													
		Nur	nber			Averag	erage Age Number		er	Disabled		Average Age	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
African													
White													



Coloured Total

SECTION C **OWNERSHIP INFORMATION** Shareholders/ Beneficiaries Name & Surname **ID Number** Shareholding % Race **Executives/ Directors/Trustees/Members/Partners ID Number** Name & Surname Race Role in the business **SECTION D** PLEASE INDICATE THE SECTOR IN WHICH THE BUSINESS OPERATES IN **Note: Please Select One** Construction Mining Manufacturing Tourism Information Communication Technology Pharmaceutical Agriculture Transport and logistics Other* (please specify) - e.g. catering, security, services Brief description of the Business: - core business activities, start date etc. Why do you need the grant amount? Give a detailed explanation for the use of the grant amount Utilisation **Amount Explanation** Machinery & Equipment Building / Rent Stock Salaries Other -Other -Other -



Initials:

SECTION E PERSONAL INFORMATION COLLECTION NOTICE AND CONSENT FORM

Please be advised that by completing this form the Applicant and all entities and or individuals referred to herein acknowledge that their personal information (hereinafter referred to collectively as "your/your personal information") will be required to be disclosed and processed for consideration under the grant funding contemplated herein to conduct all necessary background checks required in accordance with South Africa's Anti-Money Laundering Legislation and FICA processes in-order to assess your creditworthiness, conduct criminal checks, investigate prior convictions and judgements, validate all educational certification and employment history, interrogate any other information provided in support of this application.

In this regard, please note the following in accordance with Protection of Personal Information Act 4 of 2013, as amended from time to time:

- The processing of your personal information complies with obligations imposed by law.
- Your personal information shall not be retained any longer than is necessary for achieving the purpose for which the information was collected and all records of your personal information shall be deleted within 45 days as same is no longer required.
- The integrity of all personal information and authorized Responsible Party and or Data Processor is protected by taking appropriate, reasonable technical and organizational measures to prevent loss, damage unauthorized destruction, unlawful access to or processing of personal information.
- You have the right to access and rectify the information collected, including information about the identity of all 3rd parties who have access to the information.

SECTION F DECLARATION

The Applicant and all entities and or individuals represented in this application expressly agrees and warrants that:

- 1) The below mentioned signatory/is are duly authorized on their behalf and has the consent of all entities and or individuals referred to in this application to provide the personal information for the purposes set out above.
- 2) All information provided in this document and all auxiliary documentation including but not limited to the Business Plan is true, accurate and complete.

SIGNATURE

The Business Entity and all individuals, directors, shareholders, members, trustees or partners and all parties represented in this application represent and warrant that: The information provided in respect of this application is true, accurate and complete; No litigation, arbitration or liquidation, sequestration or business rescue proceedings are present, pending or threatened against it. If any such is present, pending or threatened full details should be disclosed in this application.								
YES		□ NO						
Signature of applicant:		Date:						



Initials:

DATE

SURNAME AND INITIALS | IDENTITY NUMBER

SECTION G ADDITIONAL INFORMATION REQUIRED To be submitted with the application form. **Detailed checklist:** Mark with an X if included 1 The above Application Form fully completed 2 Incorporation/ Registration Documents of the Business Entity Valid SARS Tax Pin 3 4 BEE Certificate (CIPC or Sworn Affidavit) 5 Proof of Residence Proof of active business account 6 7 CVs of Shareholders, Directors, Executives, Members of the Business 8 Certified ID copies of Shareholders, Directors, Executives, Members of the Business 9 **Business Plan with the following minimum information:** (a) Business Description, History, Location, Key Suppliers, etc. (b) Analysis of Market, Customers and Competitors (c) Analysis of production plan and processes (d) Human Resources (Company organogram and CVs of key people) (e) Marketing and Sales Plan (f) Proof of Market / Offtake Agreement (g) Capital Expenditure Plan (Machinery and Equipment and their costs); (h) Financial Forecast for 3 years (including Total Revenue, Total Costs and Profit) (i) Unique Selling Proposition (Why is your business different and why will it succeed?) (j) All pages of this application form are initialed?

Please forward your application to:

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