

USB Small Business Academy Development Programme Application for Admission to Study – Class of 2018/19

The University of Stellenbosch Business School's Small Business Academy (SBA) Development Programme is a postmatric programme that offers full-time small business owners in the Eastern Cape the opportunity to gain business knowledge that will enable them to grow and expand their existing businesses.

The SBA Development Programme is presented on a part-time basis in block weeks. This is a post-matric level programme. A certificate from Stellenbosch University is awarded to successful participants.

The programme consists of:

- 12 hours of mentoring
- 2 practical workshops
- 5 weeks of on-campus training at Ikhala TVET College in Aliwal North, including assignments
- 1 business plan presentation to the SBA's Academic Panel.

The SBA Development Programme is selection-based, following ability testing and an interview with the Selection Committee. Only selected participants will be notified before commencement of the programme.

Programme fee: R2 400 (R900 registration fee upon selection, and R500 payable in February 2019, R500

payable in April 2019, R500 payable in June 2019)

Application deadline: 4 October 2018

Programme starts: 12 November 2018

Entry requirements*

- Age: 23 years or older
- Full-time owner of an established small business of **at least two years** (24 months) or older (thus, applicant must not be in the employment of another company while running current business)
- Applicants must live or work in townships or low-income areas of the Eastern Cape
- Matric/Grade 12 (this is looked at on a case-by-case basis if applicants have not completed Matric/Grade 12)
- **No previous** management education at tertiary level is required.
- Must be proficient in English
- Students cannot be registered to study part-time at another institution during course of the 2018 USB
 SBA Development Programme

USB Small Business Academy Application Form

- Students must be **able to travel** to the training at the Ikhala TVET College in Aliwal North, as indicated on the training schedule. Accommodation is not provided.
- Students must present a business plan on the company/business that they indicated on their application forms.

Please complete the following application form and submit this together with the relevant documentation (see checklist at the end of this form).

Please note that this application form is one of the most important documents used by the Academy to evaluate your suitability for the programme. Complete it carefully and ensure that you fill out every line.

* Please note that final selection is at the discretion of the SBA Selection Committee.

APPLICANT DETAILS Surname Name (s) Nickname (name you want to be called during the programme): Date of birth Age ☐ Male ☐ Female Home (street, suburb) address and postal code South African ID number If non-South African: Passport and work permit numbers Cell Home phone E-mail address COMMUNICATION CONNECTIONS Tick appropriate answer. Do you: ☐ Yes ☐ No Own a smartphone with access to e-mail or WhatsApp? If no, do you have your own cell phone or use someone else's? \square My own Someone else's

USB Small Business Academy Application Form

Own a PC, laptop or tablet?				☐ Yes ☐ No			
Have access to the internet from home or your business?							
If no, how do you access the internet? \Box Internet café \Box Library \Box Other:							
Know how to attach a document to an e-mail?							
Know how to create a document in Microsoft Word?							
Know how to create a document in Microsoft Excel?							
Know how to create a slideshow in MS PowerPoint?							
Language							
Home language:	☐ isiXhosa ☐ Zulu ☐ English ☐ Afrikaans ☐ Other:						
English literacy level:	Read	ead					
	Write	□ Well	□ Inte	ermediate Poorly			
	Speak	□ Well	□ Inte	ermediate Poorly			
HIGH SCHOOL DETA	ILS						
School name				Year you matriculated			
If you did not complete matric, what is the highest grade you have passed?							
TERTIARY EDUCATION							
Have you studied after matric? Yes No							
If yes, please give name of the programme, how many years you completed or year of graduation							
BUSINESS STATUS							
Name of business:							
Your job title: Owner Co-owner Director Manager Other:							
Services or products:							
Industry:							
Number of years the business has been running full-time: USB Small Business Academy Application Form							

Is the business registered?
Number of employees (excluding owner):
Number of regular clients/months:
Monthly income of your business: □ 0 − R2 500 □ R2 500 − R7 500 □ R7 500 − R15 000 □ R15 000 − R30 000 □ +R30 000
Monthly expenses of your business: □ 0 – R2 500 □ R2 500 − R7 500 □ R7 500 − R15 000 □ R15 000 − R30 000 □ +R30 000
Business street address, including postal code:
Business postal address, if applicable:
Business landline number: Business cell phone number: Business e-mail address: Business website address (if applicable):
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Include the names of two people that we suppliers. References should not be olde	e can contact as references for you. They can be from any of your clients or er than 3 years.				
1. Surname	Name				
Organisation name	Role at organisation				
E-mail	Contact number (work or cell)				
2. Surname	Name				
Z. Junianic	Name				
Organisation name	Role at organisation				
Organisation name	Note at organisation				
Fcil	Contact reveals on (weath or coll)				
E-mail	Contact number (work or cell)				
STATEMENT OF INTEGRITY					
I hereby certify that I have provided accurate information in this application. I understand and agree that any misrepresentation or omission of facts in my application will justify the denial of admission, the cancellation of admission, or expulsion. This is my own, honest statement to the SBA Admissions Committee.					
stipulations of the USB Small Business Ac	derstood Annexure A. I hereby commit myself to following the guidelines and cademy Development Programme 2016 if I get selected to participate in the nyself to making the course fee payments as laid out in Annexure A or risk				
Name and Surname:					
Signature:					
Date:					
CHECKLIST					
☐ A <i>certified copy</i> of the first page of your foreign national, please include a copy of	our South African identity document (ID book) or passport (if you are a f your work permit)				
☐ A completed and signed application f	form and the four essays on separate sheets				
☐ Certified copies of your academic cer	tificates and/or Senior Certificate				
☐ Proof of payment of R50 non-refunda	able application fee				
Please submit your application form with all the attachments by Thursday, 4 October 2018 . Applications can be submitted in any of the following ways: USB Small Business Academy Application Form					

BUSINESS REFERENCES

By post: The application form with proof of payment can be posted in a sealed envelope addressed to: USB Small Business Academy, PO Box 610, Bellville, 7535.

Delivery by hand: The application form with proof of payment can also be dropped off at

JOGEDA 27 Dan Pienaar Avenue Springs Aliwal North 9750

By e-mail: Scan the application form and proof of payment and send to mzukisi@jogeda.co.za

For more information, call Muzikisi Peter 051-633 2335.

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