



CICBD'S GROW YOUR BUSINESS PROGRAMME

1.0 Background

The Grow Your Business Programme is aimed at identifying, training and coaching Caymanian entrepreneurs on how to effectively navigate the growth stage of business. Under the programme, entrepreneurs will learn how to manage business growth by building on a dynamic set of skills ranging from leadership, strategy, finance, marketing, and employee management. Additionally, participants will learn how to hone the entrepreneurial mindset, apply innovative tools and implement systems, structures and strategies that guarantee business growth.

Applicants will participate in a 3 month programme by attending weekly 3 hour training sessions. Participants will be assigned a business advisor/coach and upon the successful completion of the training element of the programme, will receive 1 year of business coaching services to customize and implement the strategies learnt. The programme is fully funded by CICBD and FREE to all participants.

2.0 Applicant Eligibility and Selection

The programme is open to existing businesses that: i) Demonstrate an interest in growth ii) Commit to entrepreneurship or iii) Have a growing market base. Applicants are determined to be eligible, based on the following criteria.

- Business must have been in existence for a minimum of two years as at 1st May 2022
- Business is a registered enterprise that is at least 60% Caymanian owned
- Must be willing to commit to 12 weekly 3-hour workshop sessions
- Must be willing to commit to 1 year business coaching after the close of the training element of the programme
- Must be willing to allow for publishing of non-sensitive business information for programme promotional purposes

2.1 Evaluation Criteria

Dimension	Measure of viability
Entrepreneurial Aptitude	<ul style="list-style-type: none">• Compatibility of traits with entrepreneurial success
Market Viability	<ul style="list-style-type: none">• A clear market need• Operates in a growing market segment• Steady revenue
Financial Viability	<ul style="list-style-type: none">• Positive cash flow• Business is profitable• Steady sales• Asset structure (fixed vs liquid)
Management Viability	<ul style="list-style-type: none">• Alignment between expertise/skills and business type• Management competence• Implementation team• Has a scalable business model

2.2 Selection Criteria

Based on the evaluation criteria noted in **Section 2.1**, enterprises will be selected for the programme based on graded evidence of scalability:

- Business has growing customer base
- Market competitiveness
- Evidence of traction
- High entrepreneurial aptitude/relevant team experience

Applications close on Wednesday, 1 June 2022



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3.0 Application Form

This form must be completed by entrepreneurs who wish to participate in the Grow Your Business Programme. **This form is not to be completed by an Agent.** All responses provided will be used solely for the purpose of assessment for inclusion. The deadline for submission of the application form is **Wednesday, 1 June 2022**. Completed applications can be submitted via email at CICBD@gov.ky with the title **GROW YOUR BUSINESS APPLICATION** or delivered to the address provided at the end of this application form.

SECTION A: CONTACT INFORMATION

1. Name of Business: _____
2. Business Address: _____
3. Mailing Address: _____
4. Telephone: _____ Email: _____
5. Main Contact Person: _____ Position: _____

SECTION B: BUSINESS PROFILE

6. Please indicate the type of ownership structure:

- () Sole Trader
- () Partnership
- () Registered Company
- () Others (specify) _____

7a. Date established: _____ 7b. District: _____

8. Trade and Business License (TBL) No.: _____

9. Annual Turnover \$KYD: _____

10. Please describe in detail the main activities, products and/or services in your business:

11. Other Director(s)/ Management Team:

12. Areas of expertise of Management Team:

13. Including yourself, how many persons are employed in the business?

14. Indicate the number of employees that are full-time and/or part-time employed

Full-time: _____ Part-time: _____

15. Which of the following sectors does your business fall in?

- | | |
|---|---|
| <input type="checkbox"/> Animation | <input type="checkbox"/> Agro-Processing |
| <input type="checkbox"/> Software Development & Mobile Applications | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Media & Communications | <input type="checkbox"/> Environmental Innovation |
| <input type="checkbox"/> Industrial Design | <input type="checkbox"/> Support Services |
| <input type="checkbox"/> Creative Industries | <input type="checkbox"/> Others (specify) _____ |

16 a. Have you ever worked with any other business development programme?

☐ Yes ☐ No

16 b. If yes, please list below:

SECTION C: TERMS OF ENGAGEMENT

I understand that completing this application form does not guarantee me a place in CICBD's Grow Your Business Programme. I declare that all information provided is true.

Applicant's Signature: _____ **Date:** _____

CICBD respects your right to confidentiality and agrees to treat the information you provide with the strictest of confidence.

SECTION D: FOR OFFICIAL USE ONLY

Received By: _____ **Date:** _____

Checked By: _____ **Date:** _____

Approved: () Yes () No **Date:** _____

CICBD
CAYMAN ISLANDS CENTRE FOR
BUSINESS DEVELOPMENT

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