|  |  |
| --- | --- |
| NUMBER OF APPLICATION  (completed by RAS) |  |

**APPLICATION**

**FOR PARTICIPATION IN STAGE I OF THE PROGRAM - TRAININGS**

**1. GENERAL INFORMATION ON THE APPLICANT**

(completed by all applicants)

|  |  |
| --- | --- |
| Name of business entity |  |
| Legal form |  |
| Registration number |  |
| TIN |  |
| Place |  |
| Street and number |  |
| Code of activity |  |
| Date of establishment |  |
| Legal representative |  |
| Number of employees |  |
| Contact telephone (land line) |  |
| Contact telephone (mobile) |  |
| E-mail address |  |

**2. TITLE OF BUSINESS IDEA**

|  |
| --- |
|  |

**3. DESCRIPTION OF BUSINESS IDEA**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DESCRIPTION OF BUSINESS IDEA AND TYPE OF ACTIVITY** | | | | |
| **DESCRIPTION OF BUSINESS IDEA OR DESCRIPTION OF TYPE OF ACTIVITY** |  | | | |
| production | | processing | services |
|
|
|
| **OBJECTIVES OF BUSINESS IDEA** |  | | | |
| **METHODS OF BUSINESS IDEA IMPLEMENTATION**  (recruiting workers, fixed assets at disposal, timeframe for the implementation of idea - (describe in 10 sentences)) |  | | | |
| **HOW DOES YOUR BUSINESS IDEA CORRESPOND TO THE MARKET NEED**?  (present a plan of market approach) |  | | | |
| **ASSESMENT OF NECESSARY INVESTMENTS** | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | Total project costs (RSD) – with VAT | Total project costs (RSD) – VAT excluded | Amount of requested funds from RAS (RSD) | RAS contribution in total costs (%) | |  |  |  |  | | | | | |
| **Shpw framework structure of costs**  (provide several most important items for implementation, total estimated amount which is required, as well as methods of financing (own funds, loans, grants and similar)) | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | Type of cost | Amount (RSD) – with VAT | Amount (RSD) – VAT excluded | Methods of financing | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | **Total (RSD)** |  |  |  | | | | | | |
| **Description of investment** |  | | | |
| **OTHER RELEVANT INFORMATION FOR YOUR BUSINESS IDEA** |  | | | |

\**Note:if necessary, expand rows or add an annex to the application*

**STATEMENT**

By signing this application I confirm that all the above mentioned information is correct and complete and I agree that the Development Agency of Serbia is not obliged to return the submitted documentation.

|  |  |
| --- | --- |
| **Place and date** | **Legal representative** |
|  |  |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ L.S.** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

All information stated in the application is strictly confidential and shall not be delivered to third parties without a prior written notice to you and shall not be used for any other purpose except fort the purposes of the Support Program for Business Start-ups – START UP PROGRAM.