

Ref. No. -

Date/Time of Receipt-

(For Official Use by SWD)

Social Welfare Department
Application for Grants from the
“Enhancing Employment of People with Disabilities
through Small Enterprise” Project
August 2009

Important Notes

This application form contains three parts, all sections of which have to be completed clearly with supporting documents wherever required. Please refer to *Chapter 3* of the Guide to the “Enhancing Employment of People with Disabilities through Small Enterprise” Project when completing this form. One soft copy (1.44MB 3.5” floppy disk in MS Word for Windows format) and 3 hard copies of the completed application form and appendices have to be submitted. Only 3 hard copies of the documentary proof are required to be submitted. Soft copies of the form and appendices can be downloaded from <http://www.info.gov.hk/swd>.

Please note that all contents set out in Part I of this application form may be made available for public access on Internet once approval for funding is given to your proposal. If you do not wish certain information to be released, please forward your request and justifications upon submission of your proposal to the “Enhancing Employment of People with Disabilities through Small Enterprise” Project Secretariat, Rehabilitation and Medical Social Services Branch of the Social Welfare Department.

Part I – Data Sheet

1. Organisation

(A) Organisation Particulars

Name in English :
Name in Chinese :
Registered Address :
Tel No. :
Fax No. :
E-mail Address :
Homepage :

(B) Contact Person

Name in English :
Name in Chinese :
Position :
*Address :
*Tel No :
*Fax No :
E-mail Address :
Homepage :

** if different from 1(A)*

2. Broad Area of Project Proposal:

3. Funds Requested from the “Enhancing Employment of People with Disabilities through Small Enterprise” Project:

HK\$

4. Keywords of the Proposal:

(Please provide a number of single keywords to facilitate search of the proposal on the Internet.)

Part II – Proposal Details

1. Concept Summary

(Please describe the concept with respect to its objectives, business/strategic alliances, business plan, target markets/buyers and the amount of funding requested, etc.)

English (not more than 200 words):

Chinese (not more than 150 words):

2. Details of the Proposal (Please provide additional sheets, if necessary)

(A) Objectives

(Please state in clear and specific terms)

(B) Outcomes

(Please state in clear and specific terms)

(C) Business plan

(D) SWOT analysis of the proposal

3. Project Implementation Schedule

(Please note that the time span of funding support will normally **not exceed twenty-four months**. The business should commence no later than six months after approval of the grant.)

(A) Commencement Date (dd/mm/yy):

(B) Completion Date (dd/mm/yy):

(C) Stages of Implementation:

Period

Milestones

4. Projections for the Proposal

(Please prepare the following projections by using the forms provided in Appendices 1–4)

(A) Projected Income and Expenditure Statement (Appendix 1).

(B) Projected Cash Flow (Appendix 2).

(C) Projected Manpower (Appendix 3).

(D) Projected Capital Expenditure on Equipment, Fitting-out Works, etc. (Appendix 4).

5. Details of the Project Team:

Project Coordinator:

Name in English :
Name in Chinese :
Position :
*Correspondence Address :
*Tel No. :
*Fax No. :
E-mail Address :
Homepage :

Deputy Project Coordinator:

Name in English :
Name in Chinese :
Position :
*Correspondence Address :
*Tel No. :
*Fax No. :
E-mail Address :
Homepage :

**if different from 1(A) of Page 2.*

Other Project Team Member(s):

<u>Name</u>	<u>Task/Responsibility</u>	<u>Remarks</u> (e.g. professional qualifications, experiences relevant to the proposed project)
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6. Other Collaborating Parties, if any:

(Please provide the names (in both Chinese and English) of the collaborating parties, the base of their parent agencies/companies (i.e. local/the Mainland/overseas), contribution and mode of participation.)

7. Other Information in Support of the Application:

Part III – Information on Organisation (and its Subsidiary Company)

Before completion of Part III, please read paragraphs 2.3 and 3.4 of the Guide. If the proposed business is created and run by the NGO directly, only the details of the NGO need to be provided below. However, if the NGO intends to do so through a subsidiary company, details of both the NGO and the subsidiary company should be provided below. Where the NGO's subsidiary company is yet to be formed, its details may be provided later but this should be stated.

Particulars/ Information	Organisation	Subsidiary Company
<p>(A) <u>Organisation/Company particulars</u></p> <p>Name in English :</p> <p>Name in Chinese :</p> <p>Year of Establishment :</p> <p>Nature of Business :</p> <p>Main Products/ Services :</p> <p>Registered Address</p> <p>Tel. No.</p> <p>Fax No.</p> <p>E-mail Address</p> <p>Homepage</p> <p>(B) <u>Capital structure</u></p> <p>(a) Date of Incorporation :</p> <p>(b) Capital - Authorised (\$) : Paid-up (\$) : Reserves (\$) :</p>		

Particulars/ Information	Organisation			Subsidiary Company		
(c) Shareholders :	<u>Name of Company/ Person</u>	<u>Place of Incorporation/ Residence</u>	<u>% of Shareholding</u>	<u>Name of Company /Person</u>	<u>Place of Incorporation/ Residence</u>	<u>% of Shareholding</u>
(d) Fiscal year end :						
(C) <u>Operational Information</u>						
(a) Board of Directors:	<u>Name of Company/ Person</u>	<u>Address</u>		<u>Name of Company /Person</u>	<u>Address</u>	
(b) No. of employee -						
- Employed in :						
Hong Kong						
- Employed in :						
Mainland and						
Overseas						
(D) <u>Contact Person of Organisation/Company</u>						
Name in English :						
Name in Chinese						
Position :						
*Correspondence Address :						
*Tel. No. :						
*Fax No. :						
E-mail Address :						
Homepage :						
* <i>If different from 1(A) of Page 2.</i>						

I hereby confirm that:

All factual information provided in this application as well as the accompanying information reflects the status of affairs as at the date of submission. I shall inform the Director of Social Welfare (Attn.: “Enhancing Employment of People with Disabilities through Small Enterprise” Project Secretariat, Rehabilitation and Medical Social Services Branch) immediately if there are any subsequent changes to the above information.

Authorised Signature with

Applicant NGO Chop :

Name of Signatory :

Position :

Name of the Applicant NGO :

Date :

(Name of Applicant NGO)

(Name of Subsidiary Company under which the Business is to be carried on)

Projected Income and Expenditure Statement

	<u>*Year 1</u>	<u>Year 2</u>	<u>Year 3</u>
	HK\$'000	HK\$'000	HK\$'000
Sales			
<u>Less :</u>			
Cost of Sales			
Gross Profit	(a) _____	_____	_____
Operating Expenses (Note 1)			
Salaries and allowances			
Rent and rates			
Insurance			
(other major items)			
	(b) _____	_____	_____
Other Income	(c) _____	_____	_____
Net Profit	(a)-(b)+(c) _____	_____	_____

* For projection purpose, Year 1 and Year 2 should cover a 24-month period. For example, if the Business is to be commenced in January 2009, Year 1 and Year 2 will cover the period from January 2009 to December 2010.

Authorised Signature with Applicant NGO Chop : _____
Name of Signatory : _____
Position : _____
Name of the Applicant NGO : _____
Date : _____

Notes 1 : Operating expenses should be broken down by major items.

2 : Notes on the assumptions and bases of calculation used should be attached.

(Name of Applicant NGO)

(Name of Subsidiary Company under which the Business is to be carried on)

Projected Cash Flow

	Mth 1	Mth 2	Mth 3	Mth 4	Mth 5	Mth 6	Mth 7	Mth 8	Mth 9	Mth 10	Mth 11	Mth 12	for Year 1	Year 2	Year 3
	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000	HK\$'000

Receipts (Note 3)

Capital

Sales

Sub-total

Payments (Note 3)

Purchases

Capital expenditure

Operating expenses

(other major items)

Sub-total

Net Cash Flow

Authorised Signature with Applicant NGO Chop :

Position :

Name of Signatory :

Name of the Applicant NGO :

Notes

Date :

- 1 The projected cash flow for the first 24 months should be analysed by month.
- 2 The commencement of the Business should be projected and based on this, the respective months and years should be stated in the projection.
For example, if the Business is projected to be commenced in January 2009, the month 1 will be January 2009 and the Year 1 will be January to December 2009 and so on.
- 3 All cash receipts and payments should be broken down by major items. The cash receipts may include any share capital or other funding to be injected into the Business.
In such case, the source and amount of funding should be shown by notes to this projection.
- 4 Notes on the assumptions and bases of calculation used should be attached.

(Name of Applicant NGO)

(Name of Subsidiary Company under which the Business is to be carried on)

Projected Cash Flow

<u>Mth 13</u>	<u>Mth 14</u>	<u>Mth 15</u>	<u>Mth 16</u>	<u>Mth 17</u>	<u>Mth 18</u>	<u>Mth 19</u>	<u>Mth 20</u>	<u>Mth 21</u>	<u>Mth 22</u>	<u>Mth 23</u>	<u>Mth 24</u>	<u>for Year 1</u>	<u>Year 2</u>	<u>Year 3</u>
<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>	<u>HK\$'000</u>

Receipts (Note 3)

Capital
Sales

Sub-total

Payments (Note 3)

Purchases
Capital expenditure
Operating expenses

(other major items)

Sub-total

Net Cash Flow

Authorised Signature with Applicant NGO Chop :

Position :

Name of Signatory :

Name of the Applicant NGO :

Notes

Date :

- 1 The projected cash flow for the first 24 months should be analysed by month.
- 2 The commencement of the Business should be projected and based on this, the respective months and years should be stated in the projection.
For example, if the Business is projected to be commenced in January 2009, the month 1 will be January 2009 and the Year 1 will be January to December 2009 and so on.
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In such case, the source and amount of funding should be shown by notes to this projection.
- 4 Notes on the assumptions and bases of calculation used should be attached.

(Name of Applicant NGO)

(Name of Subsidiary Company under which the Business is to be carried on)

Projected Manpower at Commencement

<u>Position</u>	<u>No. of Staff</u>	<u>Monthly Salary/ Hourly Rate</u>	<u>Total Cost per Month</u>	<u>Total Cost per 12 Months</u>
Total :	_____		_____	_____
	=====		=====	=====

Projected Manpower after Full Implementation

<u>Position</u>	<u>No. of Staff</u>	<u>Monthly Salary/ Hourly Rate</u>	<u>Total Cost per Month</u>	<u>Total Cost per 12 Months</u>
Total :	_____		_____	_____
	=====		=====	=====

Authorised Signature with : _____
Applicant NGO Chop

Name of Signatory : _____

Position : _____

Name of the Applicant NGO : _____

Date : _____

Note : The total manpower should be included in the projection. This should include those directly involved in the proposed business but exclude those who are already on the payroll of the Government or a Government subvented body/institution as full-time staff. Please state clearly the number of staff and the number of man-hours to be contributed by each of them, their respective ranks and monthly salary/hourly rates as well as the total cost for each of the staff. As a pre-requisite of the Small Enterprise Project, at least 50% of the manpower involved in the business should be people with disabilities and this should be clearly indicated above. Please put an asterisk (*) at the top right hand corner of the post and number of staff to indicate they are people with disabilities.

(Name of Applicant NGO)
(Name of Subsidiary Company under which the Business is to be carried on)

Projected Capital Expenditure on Equipment, Fitting-out Works etc.

<u>Description of Expenditure</u>	<u>No.</u>	<u>Estimated Cost</u> \$	<u>Estimated Month of Payment</u>
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Authorised Signature with Applicant NGO Chop : _____

Name of Signatory : _____

Position : _____

Name of the Applicant NGO : _____

Date : _____