



Client Application Form



(FORM A)

CCLEAR AgriBusiness Incubator

Application for Admission

Information submitted will be held in confidence

Business/individual name: _____

Form of ownership: Corporation Partnership Sole proprietor

Principal Officers:

Name:	Qualifications	Age	Ownership%
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Full address of contact person: _____

Telephone: _____ cell: _____ fax: _____

E-mail: _____ Internet address: _____

Brief background of Principal officer(s); please attach resume: _____

Number of years in business: ≤ 1 yr 2 yrs 3 yrs 4 yrs 5-10 yrs > 10 yrs

Are you pursuing this business: Full-time Part-time

If Part Time indicate no. of hours spent on business per week: _____

Location of your business: _____ Phone # _____

What is the ownership of the business premise like? Total ownership Family ownership
 Rental Lease hold

Date Business was established: _____

At what stage of development are the products or services you wish to market through this incubator? Concept stage Saleable products/services stage Concept stage Prototype stage Other (please specify)

Number of employees (include principals): Full-time: _____ Part-time: _____

Projected number of employees within 12 months: Full-time: _____ Part-time: _____

Have you done a market validation survey? Yes (Please attach findings) No

Who are your competitors? _____

Please supply a competitor analysis matrix clearly identifying your unique selling point (USP)

Is this new business affiliated (as a subsidiary or division) of an establish business? Yes No
If yes, name of parent company: _____

Type of financing used to operate Business to-date:

Venture capital firms Private Investors Personal resources Other (indicate nature):

BUSINESS MODEL

CCLEAR AgriBusiness Incubator program has been established to help new and existing agribusiness ventures in the livestock sector to become competitive in their operations. The services provided through the program include business coaching, professional services, and referrals to local, regional, and national business resources. Please answer the following questions (and provide the requested information) so that your application can be evaluated and the proper support package can be developed to meet your needs.

If you are aware of your business' needs, please identify the type of assistance you are seeking (please check both the topic area and the urgency of your need)

	Very urgent	Urgent	Not urgent
General Business Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Market Research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing/sales – Domestic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing/sales – International	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Plan preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Property support (e.g.patents, trademark, copyright, licenses, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contract development and review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corporate formation and support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

International (e.g. contract support, formation, intellectual property, corporate import/export, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accounting services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management team development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational services:			
Technical training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business skills training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Product development:			
Access to engineers, scientists, designers, etc to assist in product development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manufacturing/production services:			
Building a prototype	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solving a problem in your production process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locating a company to manufacture your product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locating equipment to manufacture your product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locating company to test your product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locating equipment you can use to test your product	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financing – debt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financing – equity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have funds budgeted to pay for these services? Yes No

MANAGEMENT OPERATION MODEL

How much income do you earn in a month from sales? _____

How much is left after you have paid the direct cost of what you have sold? _____

Can you pay your suppliers later, after the customer has paid? Yes No

Where do you buy your inputs? (feedstuff, veterinary medicines, water etc.) _____

Are they readily available? Yes No

How would you describe your inputs prices? Very expensive Moderate Cheap

Do you have problems with input deliveries? Yes No

Is your employee time usage a problem? Yes No

Are you willing to disclose sufficient information about your business to allow our staff and its advisors to properly assess your needs and develop the appropriate support package? Yes No

SPACE NEEDS

Approximate square metre of space requirements: _____

Type of space (i.e. number of offices/open space areas, wet-dry lab spaces, manufacturing): _____

Any special facility requirements such as electrical, ventilation, or floor load, etc.? If yes, please specify. _____

Other: _____

How did you hear about the CCLEAR agribusiness incubation program?

- Accountant: _____
- Consultant: _____
- Attorney: _____
- Business Associate: _____
- Financial Institution: _____
- Cooperative Extension: _____
- Business Advisor: _____
- Other: _____

Other relevant information: _____

Applicant's name: _____ Title: _____

Contact information: Cell phone: _____ Email: _____

Signature: _____ Date: _____

NOTE:

Please attach or mail a business plan and summary, company and project literature, and management team biographies to:

Chief Executive Officer/Manager
CCLEAR ABI
CSIR-ARI
P. O. Box AH 20
Achimota
info@cclear.org



CLIENT SELECTION



Client selection and graduation are critical to a successful incubator. The screening process would be customized to meet the CCLEAR ABI's mission and ensure the firms selected can benefit from its value-added services. All potential clients are expected to complete Form A prior to the commencement of the client selection process.

Application Process

The proposed application process for prospective clients of CCLEAR ABI involves two to three steps. The application process should be completed within about five days.

Step 1: Complete Application – All prospective clients would complete a brief application form. A completed application provides the incubator with a brief description of the applicant's current business status, and a very preliminary sense of the applicant's service and facility needs.

Step 2: Provide Business Description or Business Plan – Prospective clients who complete Step 1 and are determined to be a potentially eligible company, would be required to augment their application with a business plan or written business description. The CEO/Manager and an individual with expertise in the applicant's industry would review the document. It should provide more in-depth information about the stage of business development, stature of the management team, market potential, and overall potential for success.

At this point, if the business description or business plan adequately addresses screening criteria pre-established by the Board, the CEO/Manager could approve the applicant for acceptance and inform the Board.

If the CEO/Manager needs additional assistance to determine if approval is appropriate for an applicant an additional step would be added. It involves a brief presentation to an incubator panel as described below.

Step 3: Present to Incubator Panel – The prospective client would present their business case to a small panel of three to four people comprised of Board members, appropriate industry experts, and the CEO/Manager. The panel's role is to assist the CEO/Manager in understanding the business case and determining if the applicant should be approved for acceptance into the incubator. Based on the panel's input, the CEO/Manager would make a decision regarding acceptance and inform the Board.

Evaluation Criteria

The criteria used to evaluate prospective clients throughout the application process would be based on the mission and objectives of the incubator and be compatible with the broad mix of technologies supported by the incubator.

Suggested basic evaluation criteria include:

- The business should be a livestock agribusiness-related firm producing offerings that can be commercialized within three years. Compatible manufacturing firms that meet these criteria would also be eligible to apply, provided their space needs were compatible with the incubator facility.
- The business must be in early stages of development. Early stage usually means within the first two years of business operations, but small companies involved in a significant change in direction or launching a new business product may also apply.
- The applicant must show ability to pay incubator rents while they develop positive cash flow.
- The applicant must have a management team that the CEO/Manager feels can handle the technical aspects of the business. The management team should have entrepreneurial business acumen or be willing to accept advice from an incubator established advisory board.
- The applicant must want to take advantage of and be able to benefit from the value-added services and guidance of the incubator. The applicant business must be willing to take advice from the professional network and/or the CEO/Manager.
- The applicant business must have the capacity for growth and provide economic benefits to the Ghanaian economy including creating new jobs and opportunities for indigenous suppliers and vendors.
- The applicant must not be in direct competition with existing incubator businesses.

Graduation Policies

Graduation policies would be written into tenant lease agreements. Those policies would address time limits, value exchange, and resource commitments.

Time Limits – A maximum amount of time for a client to receive services would be set. A fairly common standard is a maximum of three years, on a month-to-month lease. This can be customized by type of business and extended on a month-to-month basis for an additional year if indicated. In particular, bioscience companies generally require a longer time to get products approved and ready for market, and often require incubator services for five to seven years. Regardless of the specific time limits established, it is important to underscore that in discussions during the business planning process stakeholders will rigorously apply this policy. They see it as critical for achieving “early wins” and fostering ongoing support for the incubator.

Value – The incubator will self-assess its ability to provide continuing value to a client. Clients who have progressed beyond the incubator’s ability to provide sufficient value would have to graduate and begin using private sector providers. Ongoing business development assessments between the incubator management and client and the month-to-month lease structure facilitate this value assessment.

Resource Commitment – The incubator will establish resource commitments and clarify expectations and responsibilities.

Anchor Tenants

Unlike incubator clients who use the value-added services of the incubator and may receive below-market rents, anchor tenants are traditional research, development, and technology-based companies or companies providing professional services to tenants within the building. CCLEAR ABI recognises that anchor tenant rents contribute to the incubator's financial stability and these tenants lease agreements would be set for a term of three to five years. Anchor tenants will be selected and admitted based primarily on their compatibility with the incubator's community of clients and their ability to reliably pay the monthly rental fees for the term of the lease.