



**GOVERNMENT OF JAMAICA**  
**INTEGRATED COMMUNITY DEVELOPMENT PROJECT II**  
**(ICDP II)**

**Enterprise Youth Development Grant- Cycle 3**  
**Application Guidelines**

**(Please read this document before completing the Application Form and Checklist)**

**1.DESCRPTION**

The project will provide grants to eligible micro enterprises already in operation for at least six months at the time of application. **Grants WILL NOT be monetary** but will be limited to the provision of equipment and tools, as well as business development training.

The grant **will not fund** recurrent expenses including wages, utility bills, and salaries.

**2.GRANT OBJECTIVES**

- To support the Government of Jamaica’s thrust to foster the development of sustainable microenterprises through the provision of capital and capacity building support.
- To create employment opportunities and income generation through investment in the microenterprise sector.

**3.ELIGIBLE COMMUNITIES**

No.	Parish	Community
1.	St. Andrew	August Town

2.	St. Andrew	Greenwich Town
3.	Kingston	Denham Town
4.	Clarendon	Treadlight
5.	St. James	Salt Spring
6.	St. James	Anchovy
7.	St. James	Norwood
8.	St James	Mt Salem

#### 4. HOW TO APPLY?

- A. APPLICATIONS will open on **Monday, June 6, 2022**
- B. Access the application form from: (1) JSIF's website at [www.jsif.org](http://www.jsif.org)  
(2) your community development committee representative, (3) at your local primary schools or  
(4) your police station.

#### 5. SUBMISSION OF APPLICATIONS

- a. **EMAIL:** State *"ICDP II Enterprise Youth Development Grant"* in the subject line and submit to our website at [www.jsif.org](http://www.jsif.org)
- b. **Deliver to the JSIF office in envelope labelled: "ICDP II Enterprise Youth Development Grant"**  
Jamaica Social Investment Fund  
11 Oxford Road (Entrance on Norwood Road)  
Kingston 5.

**CLOSING DATE FOR APPLICATION - Friday, July 08, 2022 at 4:00 pm.**



**GOVERNMENT OF JAMAICA**  
**INTEGRATED COMMUNITY DEVELOPMENT PROJECT II**  
**(ICDP II)**

*Enterprise Youth Development Grant-Cycle 3*  
*Application Form*

*Application Deadline – Friday, July 08, 2022*

**Instructions:**

1. Please read this Application Form carefully.
2. All applications must be typed OR completed in pen and submitted by the deadline date.
3. The **Checklist** must be submitted with this **Application Form**.
4. Complete all sections of the Application Form.
5. Deadline for submission is **Friday, July 08, 2022, at 4:00p.m.** All applications should be submitted via to JSIF at [feedback@jsif.org](mailto:feedback@jsif.org) or dropped off at:  
**Jamaica Social Investment Fund**  
**Ground Floor, The Dorchester**  
**Oxford Road, Kingston 5 (entrance on Norwood Avenue)**
6. Applicants should ensure that the information provided is accurate.

**APPLICATION FORM**



## SECTION 1 – PERSONAL INFORMATION

1. Name of Business Owner/Name of Applicant: \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_

3. Name of Business: \_\_\_\_\_

4. Address of Business: \_\_\_\_\_

5. Email \_\_\_\_\_

6. Telephone Number: \_\_\_\_\_

7. TRN \_\_\_\_\_

8. Sex: Female  Male

9. Age Range:

- Under 18
- 18- 23
- 24- 29
- 30

**10. Name of Community where you reside?**

- August Town (St. Andrew)
- Greenwich Town (St. Andrew)
- Denham Town (Kingston)
- Treadlight (Clarendon)
- Salt Spring (St. James)
- Anchovy (St. James)
- Norwood (St. James)
- Mt Salem (St James)

**11. Name of Community where your business is located?**

- August Town (St. Andrew)
- Greenwich Town (St. Andrew)
- Denham Town (Kingston)



- Treadlight (Clarendon)
- Salt Spring (St. James)
- Anchovy (St. James)
- Norwood (St. James)
- Mt Salem (St James)

12. Are you currently employed? Yes  No

13. Are you self- employed? Yes  No

14. Please state your highest level of education achieved (Applicant):

Name of Training Institution/School	Qualification	Year

## SECTION 2 – BUSINESS INFORMATION

15. Give a brief description of the business:

a. Type of business

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b. What product (s)/service (s) the business provides?

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16. In what year did the business begin operation? \_\_\_\_\_

17. Is the business currently in operation? Yes  No

18. Total number of years the business is in operation? \_\_\_\_\_

19. Do you operate the business in partnership with another person(s) Yes  No

20. Are you currently registered/licensed with an organization related to your trade/business? If yes, please state organization.

Yes  No



21. If yes to Question 20, please state Registration/Membership number \_\_\_\_\_

22. Do you have a business bank account?

Yes  No

23. Number of current employees: \_\_\_\_\_

24. Do you currently have a business loan or debt from any financial institutions or other sources?

Yes  No

If yes, please provide the following information:

Name of Financial Institution or Source	Loan/Debt Amount \$\$
1.	
2.	
3.	

25. Have you ever received training related to your business? Yes  No

26. List business training received in table below. (If you selected "yes" to Question 27)

Name of Training Institution/School	Qualification/Certification	Year

27. Have you benefitted from any previous **JSIF's programme**?

Yes  No

27b. If yes, please state programme \_\_\_\_\_

28. Are you willing to participate in business training?

Yes

No

29. Do you have a valid birth certificate? Yes  No

30. If no to Question 29, would you like to receive a birth certificate under JSIF's Operation Certification Project? Yes  No

### 31. Use of Technology in Business

Question	Yes	No
1. Is your business advertised online?		
2. Do you order products/services for your business online?		
3. Do you sell products/services online?		
4. Do you seek customers for your business online?		
5. Do you browse for products/services online		
6. What technological devise(s) do you use in your business:	1. Cell phone 2. Laptop 3. Desktop 4. Tablet	
7. Do you have a wi-fi hot spot in your community?		
8. How do you access the internet for your business?	1. Home internet service 2. Internet plan on phone 3. Community WIFI or hot spot 4. Other	
9. Do you use online banking in your business?		
10. Would you be interested in using the digital wallet in your business?		
11. Do you think the use of technology can improve your business?		
12. What support would you need to expand the use of technology in your business		

### SECTION 3 – LIST OF ITEMS REQUESTED

List the items being requested. Equipment, tools and stock ONLY.

- The grant will not cover rent, construction activities, wages, internet; utilities - light, water,
- The Grand Total for all items must not be above \$100, 000.00

Item (s)	Brief Description of item	Total Cost (\$JMD)	Amount (\$) requested from JSIF
<i>E.g. Refrigerator</i>	<i>4-door 120-Watt 60 Hz, 28 ¾ to 39 ¾ inches in width</i>	<i>\$60, 000.00</i>	<i>\$60, 000.00</i>
1.			
2.			
3.			
<b>Grand Total</b>			

### SECTION 4



**Applicant Validation Information**

Only applications from the list of eligible communities will be considered. By completing this application, the applicant confirms that they operate a legitimate and legal business enterprise from eligible community.

I (we) \_\_\_\_\_, Main

owner(s)/Operator(s) of the \_\_\_\_\_ Business Enterprise hereby confirm that the information provided is accurate.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





# INTEGRATED COMMUNITY DEVELOPMENT PROJECT (ICDP II)

## Enterprise Youth Development Grant- Cycle 3

### Application Checklist

**THIS CHECKLIST MUST BE COMPLETED AND SUBMITTED WITH YOUR APPLICATION FORM.**

Please tick where you currently live from the list below		
No.	Parish	Community
1.	St. Andrew	August Town
2.	St. Andrew	Greenwich Town
3.	Kingston	Denham Town
4.	Clarendon	Treadlight
5.	St. James	Salt Spring
6.	St. James	Anchovy
7.	St. James	Norwood
8.	St James	Mt Salem

	Please read the question and tick the box to the right	YES	NO
1	Is your business currently in operation?		
2	Is your business in operation for at least 6 months?		
3	Are you a resident of one of the communities listed above?		
4	Are you earning a profit from your business?		
5	Do you have a market for your products/services and wish to grow your business?		
6	Have you benefitted previously from a JSIF enterprise grant?		
7	Have you completed the Grant Application Form?		

Name: \_\_\_\_\_

Date: \_\_\_\_\_



**SUBMIT CHECKLIST AND**

**APPLICATION FORM TO:**

- a. **EMAIL:** State ***“ICDP II Enterprise Youth Development Grant”*** in the subject line and submit to our website at [www.jsif.org](http://www.jsif.org)
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