



### MICROGREEN CAPACITY DEVELOPMENT AND VALUE CHAIN ENHANCEMENT PROGRAMME

Invest in Africa (IIA) has received a grant from the African Development Bank (AfDB) to finance a project related to “Strengthening Women, Youth and People with Disabilities’ Micro-Entrepreneurship for Green Jobs in Natural Resources (MicroGREEN)” with funding source from the Fund for African Private Sector Assistance (FAPA) and Youth Entrepreneurship and Innovation Multi-Donor Trust Fund (YEI MDTF). The broad objective of this project is to strengthen the capacity of 1,000 young women, youth and persons living with disabilities (PWDs) aged 15-40years, to take up opportunities in agroforestry, fisheries and biodiversity, and enhancing intersectoral linkages in and between these sectors; in Ghana and Senegal.

All MSMEs are hereby invited to express their interest in the programme by completing and submitting their Enterprise Data Form.

ENTERPRISE DATA FORM			
<b>Name of Enterprise</b>			
<b>Physical Location</b> (Closest landmark)			
<b>Country</b>	<input type="checkbox"/> Ghana	<input type="checkbox"/> Senegal	
<b>Region</b>		<b>District</b>	
<b>Digital Address</b>		<b>Town/City</b>	
<b>Name of Contact Person 1</b>			
<b>Position:</b>		<b>Tel:</b>	
<b>Email:</b>			
<b>Name of Contact Person 2</b>			
<b>Position:</b>		<b>Tel:</b>	
<b>Email:</b>			
<b>Business Website</b> (if applicable):			
<b>Social Media Handles of the Business.</b> (If applicable)	<b>Facebook:</b>		
	<b>Instagram:</b>		
	<b>X:</b>		
	<b>LinkedIn:</b>		
	<b>Others (specify):</b>		
<b>Name of Business Owner(s)</b> (If different from contact person. If business is owned by more than one person, please list all owners.)	<b>Name</b>	<b>Gender</b>	<b>Age (Years)</b>
		<input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> 15-24 <input type="checkbox"/> 25-35 <input type="checkbox"/> 36-40 <input type="checkbox"/> 41+

			<input type="checkbox"/> Female	<input type="checkbox"/> 15-24	
			<input type="checkbox"/> Male	<input type="checkbox"/> 25-35	
				<input type="checkbox"/> 36-40 <input type="checkbox"/> 41+	
			<input type="checkbox"/> Female	<input type="checkbox"/> 15-24	
			<input type="checkbox"/> Male	<input type="checkbox"/> 25-35	
				<input type="checkbox"/> 36-40 <input type="checkbox"/> 41+	
			<input type="checkbox"/> Female	<input type="checkbox"/> 15-24	
			<input type="checkbox"/> Male	<input type="checkbox"/> 25-35	
				<input type="checkbox"/> 36-40 <input type="checkbox"/> 41+	
<b>Ghana Card Number of Business Owner/Lead Promoter</b>					
<b>Telephone Number of Business Owner/Lead Promoter</b>					
<b>Disability Status of any of the Business Owners</b>	<input type="checkbox"/> None <input type="checkbox"/> Visually impaired <input type="checkbox"/> Hearing impaired <input type="checkbox"/> Mobility impaired Others (specify)				
<b>Management Team Composition</b>	<b>Gender</b>	<b>Age Category</b>	<b>Total No. Per Category</b>	<b>PWD No. Per Category</b>	
	Male	15-40 Years			
	Female	15-40 Years			
	<b>Total No. of Management team</b>				
<b>No. of Employees</b>	<b>Category</b>	<b>Gender</b>	<b>Age Category</b>	<b>Total No. Per Category</b>	<b>PWD No. Per Category</b>
	<b>Full-time/ Permanent</b>	Male	15-40 Years		
			41+ Years		
		Female	15-40 Years		
			41+ Years		
	<b>Total Full-time emp.</b>				
	<b>Part-time/ Casual</b>	Male	15-40 Years		
			41+ Years		
		Female	15-40 Years		
			41+ Years		
	<b>Total Part-time emp.</b>				
<b>Total Employees</b>					
<b>Is your Business Registered with the Registrar General Department (Compulsory)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>If Yes, Year Business was Registered</b>		<b>Business Registration No.</b>			
<b>Form of Business</b>	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership/Cooperative <input type="checkbox"/> Private Limited Company Other (please specify):				

<b>Is the Business Registered with the Tax Authority (GRA)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Tax Identification No. (TIN)</b>		
<b>Sector of Operation</b>	<input type="checkbox"/> Agro-forestry <input type="checkbox"/> Agriculture <input type="checkbox"/> Fisheries <input type="checkbox"/> Biodiversity (e.g. non-wood forest products, eco-tourism, etc.) Others (specify)			
<b>Stage of Business Growth</b>	<b>Stage</b>	<b>Description</b>		
	<b>Seed/Startup Stage</b>	<ul style="list-style-type: none"> <li>• <b>Focus:</b> Proving the core idea and building a basic product.</li> <li>• <b>Key Activities:</b> Initial market research, developing a minimum valuable product (MVP), forming a core team, and securing seed funding.</li> <li>• <b>Typical Challenges:</b> High uncertainty, very limited resources, and finding initial product-market fit.</li> </ul>		<input type="checkbox"/>
	<b>Growth/Early Stage</b>	<ul style="list-style-type: none"> <li>• <b>Focus:</b> Rapidly acquiring customers and scaling revenue.</li> <li>• <b>Key Activities:</b> Building specialized departments (sales, marketing), refining the product, and seeking larger investments.</li> <li>• <b>Typical Challenges:</b> Scaling operations efficiently, managing cash flow for growth, and keeping up with increasing customer demand.</li> </ul>		<input type="checkbox"/>
	<b>Expansion / Take-Off Stage</b>	<ul style="list-style-type: none"> <li>• <b>Focus:</b> Significant scaling, entering new markets, or launching new products.</li> <li>• <b>Key Activities:</b> Market penetration, diversification, and establishing mature processes.</li> <li>• <b>Typical Challenges:</b> Maintaining quality and culture during rapid growth, effective resource allocation, and increased competition.</li> </ul>		<input type="checkbox"/>
	<b>Maturity Stage</b>	<ul style="list-style-type: none"> <li>• <b>Focus:</b> Stability, efficiency, and maximizing profitability.</li> <li>• <b>Key Activities:</b> Optimizing operations, defending market share, and extracting maximum value.</li> <li>• <b>Typical Challenges:</b> Slowing growth, market saturation, and the need for innovation to avoid stagnation.</li> </ul>		<input type="checkbox"/>
	<b>Renewal or Decline Stage</b>	<ul style="list-style-type: none"> <li>• <b>Focus:</b> Strategic adaptation for revival or managing downturn.</li> <li>• <b>Key Activities:</b> Major innovation, restructuring, exploring new business models, or managing exit strategies.</li> <li>• <b>Typical Challenges:</b> Intense competition, disruptive technologies, market irrelevance, or managing a controlled decline.</li> </ul>		<input type="checkbox"/>
<b>Description of Products / Services Offered</b>	<b>List products or services offered</b>			
<b>Market Coverage</b>	<input type="checkbox"/> Local (products sold within the immediate communities of the business) <input type="checkbox"/> Regional (products sold across districts and regions within the country) <input type="checkbox"/> National (products sold across the entire the country) <input type="checkbox"/> International (products exported to countries outside the home country)			
<b>Total Sales Revenue for 2025 (GHS)</b>				
<b>Total Capital Invested in the Business (GHS)</b>				

<b>Information on firm's Financial Institution</b> (If applicable)	<b>Name of Financial Institution:</b>	<b>Account Type:</b>
		<input type="checkbox"/> Personal Account <input type="checkbox"/> Business Account
<b>Has your company ever accessed any form of credit (loan) from a financial institution?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If yes, please provide the following details for the most recent loan.</b>	<b>Name of Financial Institution:</b>	<b>Most recent loan amount GHS?</b>
		<input type="checkbox"/> Less than GHS 10,000 <input type="checkbox"/> GHS 11,000 – GHS 25,000 <input type="checkbox"/> GHS 25,001 – GHS 50,000 <input type="checkbox"/> GHS 50,000 – GHS 100,000 <input type="checkbox"/> Above GHS 100,000
<b>Are you Currently Enrolled in any Capacity Building Programmes in the past 24 months?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, please list programmes enrolled below:</b>		
<b><u>Declaration</u></b>		
I ..... acknowledge that the information provided is accurate, true, and complete to the best of your knowledge. Any false or misleading information may lead to disqualification. Thank you.		
<b>Signature:</b> _____		<b>Date:</b> _____
Contact: +233 24 325 2887		Email: <a href="mailto:microgreen.gh@investinafrica.com">microgreen.gh@investinafrica.com</a>