



99 – 120 Sonnenschein Place
Saskatoon, SK S7J 3C9

(beside the Farmers Market)
www.selfemploymentprogram.com

**IMMIGRANT ENTREPRENEURSHIP PROGRAM
Application Form**

A. Personal Information.

NAME:	
ADDRESS:	
CITY:	POSTAL CODE:
EMAIL:	
PHONE:	CELL:
DATE OF BIRTH:	
SIN:	HOSP #:

Are you currently on:

	Employment Insurance	Start Date:	End Date:
	Social Assistance	Start Date:	
	Reach Back (on EI for last 3 years)		

1. Please describe your business idea.

2. Describe the products and/or services you expect to be providing

3. How much money do you think it will take to start your business?

4. What experience do you have in this particular kind of business?

Many new entrepreneurs discover that the resources and commitment required to start a business can be severely curtailed if they are experiencing any type of trauma in their lives such as a divorce, depression, or other related situation. If you are currently experiencing a situation such as these, it may be better for you to delay your application to a later date.

Date: _____

Name of Applicant (Printed): _____

Signature of Applicant: _____

RETURN TO:

Praxis School of Entrepreneurship

99 – 120 Sonnenschein Place

Ideas Inc Building (Beside the Farmer's Market at 19th St. and Ave.B)

Saskatoon, SK

Phone 664 0500

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