

Na Vualiku Capacity Building Program - Application Form

SECTION A: DESCRIPTION

The Capacity Building Program will help MSMEs, Women's Cultural Enterprises and CBT operators build the skills they need to strengthen their tourism activities and provide better services. It will offer practical training, workshops, and one-on-one guidance to improve areas like financial understanding, pricing, customer care, digital promotion, and environmental protection. The Program will connect successful applicants to Business Development Service (BDS) advisors for hands-on support to help operators make real improvements.

Please read this information before proceeding.

SECTION B: EXPRESSION OF INTEREST

» 1. Applicant's Details:

Applicant's Name: *

First and last name

Phone Contact: *

Email Address:

» 2. Business Details:

Name of Business: *

Please ensure this matches the business name on your business registration certificate

Business Address: *

Please provide the physical address of the business

In which Province do you operate your business in? *

Please select one

- Bua
- Cakaudrove
- Macuata

Is your business or organisation legally registered? *

- Yes
- I am in the process of getting my business registered
- No

What type of business do you operate?

- Partnership
- Company
- Co-operative
- Trust
- Sole Trader

» 3. About your Business Operations:

Number of years in operation: *

Which tourism sub-sector do you service?

- Accomodation
- Tour Operations
- Transportation Services (Land / Sea)
- Food and Beverages
- Tourist Attractions and Sightseeing Experiences
- Cultural and Heritage activities
- Adventure and Outdoor activities
- Cruise Services and Shore Excursions
- Retail and Handicraft
- Entertainment, Arts & Events
- Others

If other, please specify:

Have you received a grant in the last 5 years?

- Yes
- No

If yes, please provide details:	Organization providing the grant:	Amount (\$):	Purpose of the grant:
Year			
Year			
Year			

Have you obtained a loan in the last 5 years?

- Yes
- No

If yes, please provide details:	Lending Institution:	Amount (\$):	Purpose of the loan:
Year			
Year			
Year			

» 4. Training Needs Assessment

What type of assistance do you need?

- Social Media Marketing
- Booking Keeping
- Preparing Financial Statements
- Improving customer care
- Others

If others, please specify: *

» SECTION C: DECLARATION

I confirm that the above declaration is true and correct. *

- Agree