



**GECCU LTD**  
General Employees' Co-operative Credit Union Limited

## SMALL BUSINESS INNOVATION CONTEST APPLICATION FORM

### CONTACT INFORMATION

Full Name.....

Date of Birth.....

Residential Address.....

Telephone Number(s).....

Email Address.....

Social Media Handles (if any).....

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### **Business Name (if any):**

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### **Business Description**

(Provide a brief overview of your business, including the products or services offered.)

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Year Established:

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### **Innovation Idea\*:**

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Please provide a detailed description of the innovation idea that you are proposing, including its benefits and potential impact:

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Identify your target market and explain how your innovation meets their needs:

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Explain what sets your innovation apart from existing products or services in the market:

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Outline your plan for implementing this innovation within your business, including timelines and key milestones.

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**Estimated Budget:**

Provide an estimated budget breakdown for the implementation of the innovation.

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Please provide any additional information that support your application (if applicable).

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I hereby declare that the information provided in this application is true and accurate to the best of my knowledge.

Signature: .....

Date.....