



# BUSINESS PLAN TEMPLATE

<b>Title</b> _____	<b>Prison Number</b> _____
<b>First Name</b> _____	<b>Surname</b> _____
<b>Address</b> _____	

<b>Contact details</b>
Telephone: _____
Mobile: _____
E-mail address: _____

<b>Date</b> _____
-------------------

## Your business idea

<b>Business name</b> _____
----------------------------

<b>How you will describe your Business idea - your Brand?</b>
_____
_____
_____
_____
_____





## **Potential Customers**

**Who are they?**

---

---

---

---

---

---

---

---

**Where are they?**

---

---

---

---

---

---

---

---

**How will you talk to them?** (Ads, fliers, website, etc.)

---

---

---

---

---

---

---

---



## Cash

**Do you have Capital available from savings and investments?**

---

---

---

**Any Grants and training support available?**

Any financial support available from other organisations?

---

---

---

---

**What are your costs to get started?**

**Tools and Equipment:**

Advertising and Promotion

Transport

Computer Telephone

Insurance

Others etc

---

**What grant do you need to get started?**

---

---

---

---

---



**The following questions are designed to help the project set up a client-profile. In compliance with Data Protection (1998 Act), all information provided will be treated confidentially and used only by 'Startup' staff for 'Startup' work - related activities. It will not be shared with any other third parties outside the organization without your permission. Please continue below.**

**How old are you?**

- |          |                          |            |                          |
|----------|--------------------------|------------|--------------------------|
| 18 to 24 | <input type="checkbox"/> | 45 to 54   | <input type="checkbox"/> |
| 25 to 34 | <input type="checkbox"/> | 55 to 64   | <input type="checkbox"/> |
| 35 to 44 | <input type="checkbox"/> | 64 or over | <input type="checkbox"/> |

**Which of these best describes what you are doing at the moment?**

- |                     |                          |                      |                          |
|---------------------|--------------------------|----------------------|--------------------------|
| Full-time paid work | <input type="checkbox"/> | Part-time education  | <input type="checkbox"/> |
| Part-time paid work | <input type="checkbox"/> | Unemployed           | <input type="checkbox"/> |
| Full time education | <input type="checkbox"/> | Doing something else | <input type="checkbox"/> |

**Are you a parent?**

- Yes
- No

**What is your ethnic group?**

**A. White**

- British
- Irish
- Any other White background → (Please specify) \_\_\_\_\_

**B. Mixed**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background → (Please specify) \_\_\_\_\_

**C. Asian or Asian British**

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background → (Please specify) \_\_\_\_\_



**D. Black or Black British**

- Caribbean
- African
- Any other Black background → (Please specify) \_\_\_\_\_

**E. Chinese or other ethnic group**

- Chinese
- Any other ethnic group → (Please specify) \_\_\_\_\_

**Have you ever taken any business courses?**

Yes  → Please tell us who with \_\_\_\_\_

↓ \_\_\_\_\_

→ Please tell us more about the course(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

No  → Please tell us why not \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Nature of offence:** \_\_\_\_\_

**Length of Sentence:** (i.e. 'under 1 year', '1-4 years'; 'over 4 years') \_\_\_\_\_

**Date Released:** \_\_\_\_\_

Or

**Expected Date Release:** \_\_\_\_\_

***Thank you for your time and cooperation!***

**Please return to:** *Startup*, The Granary, Sandy Lane House, Sandy Lane, Tiddington, Thame, Oxon. OX9 2LA

