

NATIONAL ECONOMIC EMPOWERMENT COUNCIL



BDS PROVIDERS REGISTRATION FORM

1. BUSINESS PROFILE				
1.1. Business Name				
1.2. Business Location			1.7. Region	
1.3. Are you a registered business?	Yes	No	1.8. TIN Number	
			1.9. Business License number	
1.4. Official Email			1.10. Mobile Phone (+255)	
1.5. Date of Registration				
1.6. Service Category (Tick a relevant category)	Business Training	Business Consultancy	Market Linkage	Incubation
2. INSTITUTIONAL ARRANGEMENT				
2.1. Institutional Status	Government Institution	Private BDS Firm	Incubation Facility	Other (Specify)
2.2. Who are your targeted Clients?			2.3. Are you Charging your Service? (Yes/Nor)	
3. FORMALIZATION PROFILE				
3.1. Would you wish to partner with NEEC?	Yes	No	3.2. How have you heard about NEEC?	
3.3. Attachment Checklist (Indicate Tick or X in the respective box)				
3.3.1. Company Profile		4. List of Services	a)	
4.1.1. TIN Certificate			b)	
4.1.2. Business License			c)	
4.1.3. BRELA certificate			d)	

Thank you for taking time to fill in this registration form and your interest to achieve NEEC recognition as Business Development Service Provider. Please mail it to neec@uwezes haji.go.tz and you will hear from us within 24 working hours.

Applicant Name: _____

Designation: _____

Signature: _____