

Places are limited so please return your completed application form as soon as possible to:

School for Social Entrepreneurs  
sydney@sse.org.au  
melbourne@sse.org.au



school for  
social  
entrepreneurs

If you have any questions about your application please call us on:

Sydney 02 8008 0870  
Melbourne 03 9016 5970

# APPLICATION FORM

## YOUR CONTACT INFORMATION

First Name:

Surname:

Address:

City:

State:

Post code:

Home Phone:

Work Phone:

Mobile Phone:

Email:

Website:

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

For any of the following questions continue on a separate sheet if necessary.

## ABOUT YOUR PROJECT/IDEA

Please describe in a few words the issue or need you are aiming to address with your project.

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Who are the target beneficiaries of your project? (please select all that apply)

Aboriginal and Torres Strait Islanders

Migrants, refugees, or asylum seekers

A community of professional practice

People with alcohol, drug or substance abuse issues

Animals

People with disabilities

A particular geographic community

People with a mental illness

Disadvantaged men

Prisoners and ex-offenders

Disadvantaged women

Remote or rural community

Elderly people

Unemployed people

Environment

Workers or producers

Families

Young people

Homeless people

Other organisations

Lesbian, gay, bisexual, transgender people

Other, please add \_\_\_\_\_

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Please describe in a few words your project or social enterprise idea.

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At what stage is your project? (please select)

**Dreaming** – Experiencing an awareness of the social need and conceiving an innovative idea to meet that need.

**Exploring** – Beginning to test idea through market research, identifying stakeholders, and considering ways to generate income.  
Moving into action – project planning.

**Piloting** – Testing product or service, establishing feedback mechanisms, receiving feedback, revising the concept or product.

**Starting Up** – Attracting staff or volunteers, establishing stakeholder agreements and commitments, identifying clear measures of success and selecting evaluation mechanisms, finding a venue, finding initial market, establishing initial funding, communicating to stakeholders, launching, forming governance structures, refining concept, revising business plan and legal structure.

**Growing** – Expanding into new markets/audiences or new products, developing new partners, funding and/or income streams, and systems and/or processes, building staff and resources, demonstrating early start up success and/or tangible impact through evaluation, building public profile, conducting business/growth modelling.

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How many, and what type of service/activities/products do you have at present?  
(If none at present, please answer the question below.)

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How many, and what type of service/activities/products are planned for development?

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What is the current legal status of your project? (Select "none" if you don't have one.)

None

Company limited by guarantee

Sole trader

Company limited by shares

Unincorporated association

Partnership

Incorporated association

Trust

Cooperative

## ABOUT YOU

What are your main reasons for applying to the SSE Program? (select all that apply)

To solve a problem I have identified

For personal development

To set up my own organisation

To take a break from my career

To develop an organisation I have already set up

To change my career

To set up an initiative in an organisation I am working for

Other (please specify) \_\_\_\_\_

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What qualities or experience will you bring to the group (personal or work experience)?

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What do you hope to get out of your time at SSE?

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What do you consider your main challenges to be, including personal ones?

## YOUR STRENGTHS AND WEAKNESSES

If we asked someone who knows you well to describe you, what would they say?

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What would they say were your strengths and weaknesses?

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Could you please tell us a little about your cultural background?

## YOUR EDUCATION/TRAINING

We don't require you to have any qualifications or training to join the SSE Program but we would like to know what education or training you may have already completed or begun.

.....  
Please tell us if you have any qualifications or about any formal training you might have participated in.

.....  
How do you learn best?

.....  
How would you describe your participation in groups?

.....  
Please tell us about any previous work or personal experience you have had, either paid or voluntary. How does this relate to your current project?

## CURRENT ACTIVITIES/EMPLOYMENT

Please tell us about any work or activities you are doing at the moment, either paid or voluntary, and any responsibilities you have. If you work in an organisation please give the name and address and detail how long you have been there.

.....  
Are you:

Self employed

Employed

In education or training

Unemployed

Other (please specify)

## YOUR ACHIEVEMENTS

Tell us about three achievements you value most from the last two years.

One:

Two:

Three:

## PARTICIPATING IN THE SSE PROGRAM

Are you able to participate in the SSE Program on all the dates outlined in the program schedule?

Yes

No

What might be the barriers to your full attendance?

How many days per week are you available to work on your project? \_\_\_\_\_

Does your project pay you a salary?

No

Full-time

Part-time, \_\_\_\_\_ hours per week

Do you have any other employment? (please tick)

No

Full-time

Part-time, \_\_\_\_\_ hours per week

How do you plan to support yourself financially throughout the SSE Program?

How do you plan to pay/fundraise the \$1500 minimum student contribution? (Please note: It is our intention that the student fee should not create a barrier to participation in the program. If you have concerns about the fee please discuss this with us at interview.)

Are you seeking additional employment?

Yes

No

Are you in receipt of any government benefits?

Yes

No

Do you live or work in a public housing community?

(A limited number of dedicated bursaries are available for students living or working within housing communities)

Yes

No

THANK YOU!