



APPLICATION PROCESS:

- 1) Complete the following forms and submit them to ibi@capilanou.ca:
 - a. Eligibility Form
 - b. IBI Application Form
 - c. Updated Resume
- 2) Your application and support documents will be reviewed by the IBI Advisory Committee.
- 3) Virtual interviews will be scheduled with applicants.
- 4) Those selected for the program will be contacted by May 1st and provided with further program details.

Before you apply, please ensure you are eligible (see page 5 for more details). We are committed to keeping you informed and even if your application is unsuccessful, we will let you know.

Use this checklist to ensure you have completed all segments of the application:

| Ц | Declaration of indigenous identity (page 3) |
|---|---|
| | Waiver Form (page 4) |
| | IBI Eligibility Form (page 5) |
| | Indigenous Business Incubator Application Form (page 6 – 9) |
| | Supporting documents (ex: resume, etc.) attached separately |





Contact Information

| First Name: | | | |
|----------------------|---|--|--|
| Last Name: | | | |
| Preferred Last Name: | | | |
| Pronouns: | | | |
| Date of Birth: | | | |
| Street Address: | | | |
| City/Town: | | | |
| Province/Territory: | | | |
| Postal Code: | _ | | |
| Phone: | | | |
| Email: | | | |
| Emergency Contact | | | |
| Name: | | | |
| Relation: | | | |
| Phone: | | | |





Declaration of Indigenous Identity

The purpose of this form is to collect data and information regarding Indigenous identity, which will better support Indigenous Business Incubator clients and support Capilano University's commitment to Decolonization and Indigenization. Please fill out the form below and sign before submission.

| First Name: | | Last Name: | |
|-------------|---|--|--|
| Indigen | Indigenous Nation: | | |
| Indigen | Indigenous Ancestry (please select one): | | |
| | Status/First Nations of Canada | | |
| | Status Card Number: | | |
| | Community Name: | | |
| | Province or Territory: | | |
| | Non-Status/First Nations of Canada Non-status please contact the Program required supporting documents. | n Coordinator to discuss eligibility and | |
| | Métis | | |
| | Métis Citizenship Number: | | |
| | Community Name: | | |
| | Province or Territory: | | |
| | Inuk | | |
| | G.I.C Number: | | |
| | Community Name: | | |
| | Province or Territory: | | |
| Registe | red Band/Nation/Community Contact: | | |
| Name: | | | |
| Email: _ | | | |
| Phone: | | | |





Indigenous Identity Waiver Form

| Capilano University to confirm n | _, hereby authorize the Indigenous Business Incubator (IBI) and my information regarding enrollment and connection to an provided above. I understand that any information released IBI and Capilano University. |
|--|--|
| I,date and filled out correctly to the | _, declare that the information provided in this section is up to ne best of my knowledge. |
| I,automatically dismiss my applic | _, understand that any false or misleading claims will ation. |
| Signature | Date |





Eligibility Form

The Indigenous Business Incubator is for early-stage Indigenous artists and creators to test your ideas within a Lean Business Plan framework and to be mentored while you launch your new business. The program is unique as it emphasizes Indigenous ways of knowing and being in a modern ecosystem.

| Eligibility Requirements: | |
|---|--|
| □ Indigenous Ancestry □ Resident of BC □ Have a business idea related to the arts □ Access to a printer/scanner, computer or tablet and reliable internet access | |
| Address of Business: | |
| | |
| Will your business be majority Indigenous owned & operated (51% or higher)? | |
| □ Yes | |
| □ No | |
| If your business is currently in operation, how long has it been operating for? | |
| | |
| Will this business be for-profit? | |
| □ Yes | |
| □ No | |
| | |





1. Tell us about your business. (500 word maximum)

- 2. Will your business be wholly owned by you or are you planning to have partners?
 - \square Wholly owned by myself
 - ☐ I will have partners





| 3. | what is your sector / industry? |
|----|--|
| | music |
| | film |
| | fashion |
| | textiles |
| | writing |
| | printing/publishing |
| | visual arts |
| | graphic design |
| | live performances |
| | health/wellness products |
| | other: |
| | |
| 4. | How would you describe your business activities or business model? |
| 4. | How would you describe your business activities or business model? manufacturing |
| 4. | |
| 4. | manufacturing |
| 4. | manufacturing retail |
| 4. | manufacturing retail hand-made crafts, specialty gift products |
| 4. | manufacturing retail hand-made crafts, specialty gift products jewelry (beaded, silver, gold, other) |
| 4. | manufacturing retail hand-made crafts, specialty gift products jewelry (beaded, silver, gold, other) on-line |
| 4. | manufacturing retail hand-made crafts, specialty gift products jewelry (beaded, silver, gold, other) on-line store |
| 4. | manufacturing retail hand-made crafts, specialty gift products jewelry (beaded, silver, gold, other) on-line store wholesale |
| 4. | manufacturing retail hand-made crafts, specialty gift products jewelry (beaded, silver, gold, other) on-line store wholesale health/wellness products |





| 5. | Ple | ase indicate the stage you are at: |
|----|-----|--|
| | | Idea Stage |
| | | Have developed products |
| | | Have started offering my services |
| | | Selling to friends and family |
| | | Participated in craft fairs and/or trade shows |
| | | Set up my point of sale |
| | | Established an online presence (Facebook, Etsy, etc.) |
| | | I have chosen a business name |
| | | I have opened a bank account |
| | | I have applied for or have already received funding for my business |
| 6. | | ease share key areas (up to 5) where the Indigenous Business Incubator can help your rt-up. |
| | | Registering business name |
| | | Explain the steps to business start-up and launch |
| | | Provide information on taxation |
| | | Identify where to find funds to cover business start-up costs |
| | | Banking advice |
| | | Promoting and Marketing ideas |
| | | Day to day business operations |
| | | Website development |
| | | Policies and procedures |
| | | Intellectual property |
| | | Business Planning |
| | | How to price my products/services |
| | | Packaging and Shipping tips |
| | | How to prepare for a trade show |
| | | |
| | | |
| | | |





| 7. | Hov | v did you hear about us? |
|----|-----|--------------------------|
| | | Search Engine |
| | | Social Media |
| | | News |
| | | Referral |
| | | Other |
| | | |

Thank you for your application!

If you have any questions or experience difficulty accessing the forms or attaching support documents please contact the Program Coordinator, via email: ibi@capilanou.ca