# Youth Entrepreneurship Initiative **2015 BizCamps**

### Participant Application

Parent/Guardian kindly fill in page one.

Please have your student complete the page two questionnaire.

Submit as instructed below.

We have a rolling acceptance process; applicants will be notified as soon as the application is accepted until we have filled each week of BizCamp.

BizCamp runs for 7 days. (not including Saturday or Sunday). Please select which session you are interested in attending.

#### **Session One**

#### **Session Two**

July 6, 7, 8, 9, 10, 13 & 14 July 16, 17, 20, 21, 22, 23 & 24

Applicant's Name

Home Address (street, parish, & postal code)

Phone (Home)

(Work)

(Cell)

Grade (student is just completing)

School (student is presently attending)

Parent/Guardian please enter your most direct **Email Address** below to acknowledge applicant has permission to apply for this program.

Save Form as a PDF (please note applicant's name in title) and e-mail to:

#### e-commerce@gov.bm

Or, print & deliver to:

Department of E-Commerce, Government Administration Building, 40 Parliament Street, 3rd Floor

> For questions please e-mail — e-commerce@gov.bm Have student complete page two

## Youth Entrepreneurship Initiative 2015 BizCamp Applicant's Questionnaire

- 1. What would you like to do for a career?
- 2. List your plans after you graduate from high school.
- 3. List any jobs or work experience or community projects you have participated in.
- 4. List your hobbies or extra-curricular activities.

- 6. Who are your heroes and mentors that you look up to?
- 7. If you could have lunch with anyone in the world, who would it be and why?
- 8.In which of the following industries would you prefer to open a business?

  technology/e-commerce tourism/hospitality

  Other
- 9. Tell us what type of business you would start if you were given \$5,000? Limited to 25 words or less.

THANK YOU