



USAID
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Tunisia JOBS
Jobs, Opportunities & Business Success



User's Manual

For the Partner Grant Application

COVID-19 ENTERPRISE RECOVERY GRANT FUND



PARTNER GRANTS

Only available for current JOBS partners (companies with a signed partnership agreement or an ongoing pre-feasibility assessment). These companies will receive a designated login to access the application form.

Awards up to TND 125,000

Applications will be reviewed in the order in which they are received until December 31, 2020 or when funds are no longer available (whichever is sooner). Applicants are encouraged to apply early.

The details and information in the following example have been included for information purposes only.

General Company Information

In this section, you will be asked to fill in general information relating to the company applying for the grant.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submit

General Company Information



Company Name: *	<input type="text" value="Société Lys"/>
National Business Registry Number: *	<input type="text" value="01234567A"/>
Year of Establishment of the Company: *	<input type="text" value="2014"/>
Phone: *	<input type="text" value="70123456"/>
Email: *	<input type="text" value="smallfoulenab44@gmail.com"/>
Street line 1:	<input type="text" value="Rue les Ecoliers"/>
Street line 2:	<input type="text" value="Cité Nakhil"/>
City or Governorate: *	<input type="text" value="Jendouba"/>
Zip Code:	<input type="text" value="2345"/>
Country: *	<input type="text" value="Tunisia"/>
Longitude:	<input type="text"/>
Latitude:	<input type="text"/>
Website:	<input type="text"/>
Sector:	<input type="text" value="Human health and social work activitie"/>
Sub-Sector:	<input type="text" value="Sub Sector..."/>

Company Owner

Name: *	<input type="text" value="Foulena Ben Foulen"/>
Gender: *	<input type="text" value="Female"/>
Position: *	<input type="text" value="General Manager"/>
Mobile: *	<input type="text" value="23145678"/>
Email: *	<input type="text" value="partnerfoulenab44@gmail.com"/>

Company Capital Structure

Legal Status: *	<input type="text" value="SARL"/>
Ownership: *	<input type="text" value="Sole Ownership"/>

Is ownership and capital of the company 100% Tunisian?

Taxation Scheme: *

Legal Entity: *

Business Company Group

Is the company part of a company group?

Name of Group:

List all Companies in Group:

Legal Documents

Patent or Register of Commerce *

 download (1).jpg

Procurement and Purchasing Policy (If available)

 ssss.jpg

Submit

Cancel

Company Contact Person

In this section, you will be asked to fill in information about the person completing the application (an authorized representative of the company).

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION: You will not be able to go back and change this information, so please review it carefully before submit

Company Contact Person

Company Contact

Name: *

Foulana Ben Foulen

Gender: *

Female ▼

Position: *

Executive Director

Mobile: *

23145678

Email: *

partnerfoulenab44@gmail.com

✔ Submit

Cancel



General Questions

In this section, you will be asked to respond to general questions about the company and grant proposal.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submitting.

Questions 4 and 7 are presented in the negative form. Please answer «True» to confirm and «False» to disprove.

General Questions

Business is registered by Government of Tunisia

Yes

Business is in compliance with Tunisian civil and fiscal regulations

Yes

The company's balance sheet is free of excessive debt (Total Debts/Total Assets (%) is 75% or lower)

Yes

Business has not received a grant from an international donor in the past six months

True

The company is free from involvement in criminal activity, corruption, etc.

Yes

The company is free from negative environmental, labor, and social issues

Yes

The proposed grant will not result in negative impacts to the environment

True

The company is committed to sharing data on sales and jobs

Yes

Does the grant request include support for any of the following restricted and/or ineligible goods?

No

Salaries

No

Construction or infrastructure activities

No

Purchases made prior to the grant

No

Prior debts

No

Military equipment

No

Surveillance equipment

No

Commodities and services for support of police and other law enforcement activities

No

Abortion equipment and services

No

Luxury goods and gambling equipment

No

Weather modification equipment

No

Motor vehicles

No

Pesticides

No

Fertilizers

No

Pharmaceuticals

No

Contraceptives

No

Medical equipment

No

Items purchased in China, Cuba, Iran, North Korea, or Syria

No

Phones - Mobile phone, mobile phone service providers, VoIP phones (desk lines), audio conferencing service accounts

No

Internet service provider

No

Cloud servers

No

Amazon cloud-based service

No

Computers – desktops and laptops, computer monitors, tablets

No

Printers, scanners, fax machines

No

Infrastructure equipment – (router, switch, hub, server, firewall, encrypter), RSA tokens (SecurID)

No

Portable electronic storage devices

No

Submit

Cancel

Management Background

In this section, you will be asked to describe the company's management.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submitting.

Management Background

Introduce the company's management and/or owner, including educational background, professional and industry experience, and vision. *

Ms. Foulena Ben Foulén, Executive Director of graduated in and has over years of experience in Aware of the importance of educating civil society about human health, Ms. Foulena has devoted herself all around this cause in order to raise awareness in civil society through workshops and events in various establishments and associations.

Memeber of for years, Mrs. Foulena Ben Foulén acted as Over the course of many years of hard work, this trajectory has taken shape, which is now being realized.

Submit

Cancel

Professional References

In this section, you will be asked to provide information for professional references. These could include current or former clients, chamber of commerce, and/or local officials. **JOB**s may contact these references as part of the application review process.

Please enter a minimum of three references. Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submitting.

Professional References

Reference :

Name & Organization

Souheil Chemmi

Ste Age+

Relationship to the Company

Supplier

Telephone & Email

71234567

steage+@gmail.com

Reference :

Name & Organization

Omezzine Chikh

Sehhati

Relationship to the Company

Consultant

Telephone & Email

70123456

Sehhati@yahoo.fr

Add Reference

Submit

Cancel

Activity & Market Information

In this section, you will be asked to describe the company's products and services, main competitors, and current and potential buyers.

Please enter the information, review it carefully, and click submit when this section is complete.

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Activity & Market Information



Products / Services

Principal Products /Services *

Reception of young and old people with reduced mobility
Hospitalization
Home help
Medical accommodation



Does the business produce essential goods and services to combat the COVID-19 pandemic?

Select an answer ▼

If yes, please explain the goods or services to be produced and how this will support Tunisia's efforts to combat the pandemic

Provision of two of our ambulances at the service of the Ministry of Health in Tunisia for the transport of people with Covid-19 to hospitals / Covid-19 centers



Competitors

Main Competitors *

Sté Kbarna
Center Y for old people



Domestic Buyers

Main Buyers *

Tunisian families who wish to offer comfort, hospitalization and assistance to their children and seniors with reduced mobility



Identified Potential Buyers *

families with financial ease in Greater Tunis



International Buyers

Main Buyers *

None



Identified Potential Buyers *

None



✓ Submit

Cancel

Certifications, Grades & Standards

In this section, you will be asked to describe the certifications, grades and standards the company holds.

Please enter the information, review it carefully, and click submit when this section is complete.

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Certifications, Grades & Standards

Environmental Compliance

Attach signed document on compliance with standard specifications for environmental management by the National Agency of Environmental Protection (ANPE/Agence Nationale de Protection de L'Environnement)

ANPE Certification

Choose File

download (1).jpg

Certification, Grades & Standards :

Certifications, Grades & Standards

OTAN

Description

Certification Test

Choose File

Choose File

No file chosen

Add Certification

Submit

Cancel



Financial Information

In this section, you will be asked to enter financial information about the company.

Please enter the information, review it carefully, and click submit when this section is complete.

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Financial Information



Revenues

	Total	Export
2019	<input type="text" value="16000"/>	<input type="text" value="4500"/>
2020 (Current)	<input type="text" value="3000"/>	<input type="text" value="987"/>
2021 (Expected)	<input type="text" value="40000"/>	<input type="text" value="132456"/>

Capital

	Expenditures	Liabilities	Assets
2019	<input type="text" value="4564000"/>	<input type="text" value="24537"/>	<input type="text" value="98765"/>
2020 (Current)	<input type="text" value="543671"/>	<input type="text" value="456778"/>	<input type="text" value="736378"/>
2021 (Expected)	<input type="text" value="7089766"/>	<input type="text" value="345231"/>	<input type="text" value="736378"/>

% Capacity Utilization

	% Capacity Utilization
2019	<input type="text" value="67"/>
2020 (Current)	<input type="text" value="40"/>
2021 (Expected)	<input type="text" value="87"/>

Working Capital Needs

	Working Capital Needs
2021 (Expected)	<input type="text" value="8700"/>

Documents to be Attached for 2019

Balance sheet
(Required): *

bilan-comptable-1.jpg

Income statement
(Required): *

bilan-comptable-1.jpg

Cash flow
statement
(Optional):

flux de trésorerie.jpg

Notes to financial
statements
(Optional):

ssss.jpg

Depreciation table
(Optional):

tableau d'amortissement.jpg

Fiscal Documentation

In this section, you will be asked to attach fiscal documentation.

Once the documents are attached, review them carefully and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submitting.

Fiscal Documentation

Please select all three files at one time.

Monthly income tax declaration (three most recent months) *

Choose Files bilan-comptable-1.jpg

Annual income tax declaration *

Choose File flux de trésorerie.jpg

Submit

Cancel

Employment Information

In this section, you will be asked to enter employment information about the company.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION:You will not be able to go back and change this information, so please review it carefully before submitting.

Employment Information

General Information

Working hours per week: (40 hr. or 48 hr.) *40 hr

Does the company employ primarily women and youth (ages 18-25)?Yes

Does the company employ persons with disabilities?Yes

Professional Employees

Period	Male	Female
2019	2	4
2020	3	5

Non-Professional Employees

Period	Male	Female
2019	2	3
2020	3	6

Social Security Declaration (most recent quarter) *

Choose File bilan-comptable-1.jpg

Social Security Declaration (second most recent quarter) *

Choose File état de résultat.jpg

Submit

Cancel

Grant Proposal

In this section, you will be asked to enter details about your grant proposal, including a synopsis of the company and plans for growth, a summary of COVID-19- impact on the company, what support is requested through the grant, and the impact the grant is expected to achieve.

Please enter the information, review it carefully, and click submit when this section is complete.

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- **Incremental Sales in 2021** – this should be the expected sales generated by the company as a result of the grant
- **Employees Recovered or Sustained in 2021** – this should be the current number of jobs within the company that are threatened, but can be sustained as a result of the grant
- **New employees in 2021** – this should be the expected number of new employees that will be hired by the company as a result of the grant

Grant Proposal

General Questions

Company Synopsis. Describe the company, main activities, and plans for growth. (Up to 200 words) *

Reception centers allow elderly people living at home to benefit from assistance, care and activities adapted to their loss of autonomy. It is an alternative to placement in a retirement home and allows the elderly to stay longer
Develop a life plan that describes the goals they intend to propose to promote the well-being and development of older people.

COVID-19 Crisis Impact. Please describe how COVID-19 has impacted your business specifically regarding sales, employees, production, availability of raw materials, or other factors. (Up to 300 words) *

During times of isolation and quarantine, elderly people need safe access to nutritious foods, essential items, money and medicine to ensure their physical health, as well as social assistance.
Older adults often rely on the support of communities and their caregivers / caregivers to maintain their daily routine, stay active, and eat a nutritious, balanced diet.
After Covid-19, many members have suspended their membership for fear of contamination, so we risk some job loss and even bankruptcy.

Main Purpose of Grant (select all that apply)

Procurement of raw materials

Yes

Acquisition of machinery or equipment

Yes

Rental of facilities

No

Payment of services/utilities required to run the business

No

Increase production or delivery of goods or services to combat the COVID-19 pandemic

Yes

Other

No

If other, please explain:

What are the problems or opportunities and how will the grant funding allow your business to address this?

Problem & Solution:

Problem

the number of daily visitors to the residential care house decreased due to Cov

Solution

Opening of a new unit for another targeted residents to offset losses

Add Problem and Solution

Please complete an action plan with all the required actions and deliverables/milestones to be achieved under this grant proposal

Note: that the company should contribute at least 50% of the activity (a lower contribution may be considered only on a case-by-case basis)

Specific Actions & Costs:

Solution

Opening of a new unit for another targeted residents to offset losses

Action

Set up a vital residence and equip it with necessary wheelchairs and medical beds:

Responsible Party

Société Lys & JOBS

Deliverables / Milestones

Equipment acquisition

Target Date

05/12/2020

Est.Cost to Firm(TND)

15000

Est.Cost to JOBS(TND)

8000

Est.Total Cost(TND)

23000

Add Action

Result of Funding (state the expected impact from the grant)

Incremental sales in 2021 (TND) *

14000

Employees recovered or sustained in 2021 *

6

New employees in 2021 *

8

Will this grant benefit your suppliers and other companies related to your production?

No

List all companies that will benefit and describe the impact for each:

Will the grant enable the company to access additional means of financing?

No

If yes, what is the source, and how much is expected?

Source *

Other

Value (TND) *

Will the company invest cash or equipment as part of this grant? (This should be reflected in the budget section)

Yes

How will this grant impact your production? Describe in specific quantities.

Increase of Number of memberships: 40

Describe any expected impact on the company's sector:

Some residential care centers closed their doors due to Covid-19 and developing such a new activity within our house will encourage other similar centers or associations reopen and resume work.

Describe any expected social impact on employees, or surrounding community:

A lot of attendant beneficiaries are blocked in Tunisia since all foreign recruitment missions were suspended because of Covid-19. Those missions are targeting essentially attendant beneficiaries and other medical competencies. This is may be an opportunity for some to get recruited by Société Lys and enjoy homeland work experience since we are aligned with international standards.

Submit

Cancel

Estimated Grant Budget

In this section, you will be asked to enter details on the estimated costs associated with the company's grant proposal.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION: You will not be able to go back and change this information, so please review it carefully before submitting.

Estimated Grant Budget (TND)

Expense Category

Equipment

Name

pair of ramps

Description & Technical Specifications

TÉLESCOPIQUES ERGO 152 CM

Unit and Rate

3

890

Total Cost

2670.00

Jobs and Grantee Contribution (%)

50

50

Potential Vendors (Name & Address)

Serphadom , rue ibn jazar 1006 Tunis

Notes

Grand TOTAL :

Add Another Expense

Submit

Cancel

Signing & Certification

In this section, you will be asked to certify that the information submitted in the application is true and correct. You will be asked to digitally sign the application.

Please enter the information, review it carefully, and click submit when this section is complete.

CAUTION: will not be able to go back and change this information, so please review it carefully before submitting.

Signing & Certification

Thank you for completing all the application sections.

Prior to submitting your application for review, please sign the following certification statement: "I hereby declare that the information provided in this application is true and correct."

Signature (Please type full name): *

Foulana Ben Foulén

Position: *

Executive Director

Submit

Cancel

If you have any questions,
please submit to grants@tunisiajobs.org



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