**YES – I would like to apply for the Entrepreneurship Workshop**

**18th and 19th of May 2017 at SDU in Kolding.**

* **Yes, I want to participate in an evaluation after the workshop.**

**If you have questions you are very welcome to talk to Tina Nikolajsen at tn@businesskolding.dk**

**For questions please contact Tina Nikolajsen at tn@businesskolding.dk**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Postal code/City** |  |
| **E-mail** |  |
| **Phone** |  |
| **Company name?** |  |
| **CVR-nr.?** |  |
| **Website?** |  |

|  |
| --- |
| **Short description of the business idea that has my interest …** |
|  |

**I am attracted to the thought of entrepreneurship, and at the moment I have:**

* **An idea in the making.**
* **An idea and I’m on my way of building my business.**
* **Having registered my company (CVR-nr.).**
* **I’ve had my first sale.**
* **I’ve sold something more than once.**

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| --- |
| **I would like to participate in the Entrepreneurial Workshop because …** |
|  |

**Send the filled out application form to Tina Nikolajsen at** **tn@businesskolding.dk**

**There is a limited number of seats, distributed on a first-served basis.
Application deadline Wednesday 12th of May.**

*On the first day of the course you will be kindly asked to fill out some tables regarding time consumption.*