

# New Business Assistance with NEIS

## Application Form – APM Employment Services

Complete all sections of this application form and return the completed back us by post or email; we will assess your business idea. This form is a crucial process towards your acceptance to the program, all sections must be completed.

All information provided in this form will be treated in line with the APM Employment Services privacy consent policy. To assist in the review of your application we may have to contact your jobactive provider.

Please write clearly. Attach any information that could help us better understand your business idea.

**Business Idea:** (please record details of your business idea in the space below)

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Sole Trader (on your own)

Partnership

Company

If you have a potential business partner, are they eligible for NEIS? Yes No

Your name D.O.B / /

Business partner's name (if applicable) D.O.B / /

Your JSID (if applicable)

Business Partner's JSID (if applicable)

Address

Phone

Mobile

Email

Designated jobactive provider (if applicable)

Name of your Employment Consultant (if applicable)

Phone number of your Employment Consultant (if applicable)

Email address of your Employment Consultant (if applicable)

Have you been classified as an undischarged bankrupt? Yes No

**apm.net.au**  
**1300 006 347**

**New Business  
Assistance**  
with NEIS

AN AUSTRALIAN GOVERNMENT INITIATIVE

**APM**  
employment services



**The business proposal** (Please complete all sections)

4. Have you previously participated in New Business Assistance with NEIS? Yes  No

5. What licences or qualifications do you (or your partner) have that are related to the operation of your proposed business?

6. Any further comments you would like to make to support your application?