

ANNEXURE 6

Eligibility Criteria for the Startups under YELP

Rationale

To promote small and cottage industries in the country, the government has come up with the Startup and CSI Flagship Program in the 12th plan. Through this program, all the relevant stakeholders are brought under one coordinating agency to consolidate the efforts and address all the issues that hinder the development of the CSIs. Despite all the efforts and the support rendered by the government, propelling the SME is still a challenge, and support in the initial phase of the startup is found to be very critical. Considering the need for crucial support for new startups, the DoEHR has come up with the post-training support under YELP.

Eligibility criteria

To avail the YELP support, the new startups (operating single or in a group) should fulfil the following criteria:

1. A startup should have a business license if the business requires a license to operate the business;
2. The support will be made available for those who have started the business from July 2018 onwards;
3. The startup should have availed any form of training or facilitation services to promote his/her business;
4. The applicant should have a business in hand/ currently operating.

YELP Application Form for Entrepreneurs

1. Name of Entrepreneur(s):
2. Mobile Number:
3. Mobile Number of the parent:
4. Email:
5. CID number (attach copy):
6. Business license if applicable (attach copy)/relevant documents:
7. Name of Business:
8. Location:
9. Business Type: Sole Proprietorship/Group (If the business is operating in a group, the proponents have to submit the internal agreement/Bylaws or any other concern letters from Gewog/Dzongkhag/Thromdes.
10. Duration of support required:Months

Name and Signature of the Applicant

Date:

OFFICIAL USE

Verification/Recommendation by ESED (Upon physical verification with evidence by officials from ESED/Regional Offices)

- Recommended for YELP support
- Not recommended for YELP support

Verified By:

Name:

Signature:

Date of Verification:

Signature
CPO, ESED/Regional Director

| Processed by | Recommended by | Approved by |
|---------------------|--------------------------------|--|
| Program Officer | CPO, ESD/ Regional Director | Director-General, DoEHR/Regional Director |