

# *My Business Plan*

Name

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Business Name

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Business Partners

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Contact Information

Phone \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

# Business Plan

Category Applying For:

Junior (age:8-12)

Senior (age:13-18)

Status of Business:

Existing Business

Creating a Business

Describe your Business or Business Idea in the box below. If existing business, please give a brief history of the business. If you are creating a business, please describe your vision.

**Organizational Structure:** List each person that will have a role in the company along with their title or function.

<u>Name</u>	<u>Role</u>
_____	_____
_____	_____
_____	_____
_____	_____

**Qualifications:** What skills and experience do you have that will make your business successful?

# Financial Information

Where will you get the money to start your business? How much will you need to get started? (Please attach a financial statement of income and expenses). Include the written description in the box below.

What price will your customers be willing to pay for your product/service and how was this price determined?

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How much will it cost to produce your product?

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How much do you want to get paid per hour if you are selling a service?

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How much net income will you make by selling this product/service?

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Will you need employees and/or partners to:

- |                           |                              |                             |
|---------------------------|------------------------------|-----------------------------|
| 1. Make products?         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Sell products/service? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Promote products?      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

What will be the cost of these employees and/or partners?

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# Market Research

Who are your potential customers & why do they need to buy your product or service?

How will I get customers? (Marketing Plan)

Who will be your competition?

Where will your business be located & why?

How much time will be required to operate your business?

(Please describe your level of commitment to the business and how you will allocate your time in the best interest of the business?)

What are your plans for the future (Please describe a 3-year and a 5-year plan)

# Business Goals

Goals you want to achieve in the first/next three months of business:

Goals you want to achieve in the first/next year of business:

Goals you want to achieve in the first/next three years of business:

## SWOT Analysis

*Strengths* (Advantages)

*Weaknesses* (Disadvantages)

*Opportunities* (Possible good things to come)

*Threats* (Possible difficulties)