**DIGITAL ACCELERATOR REGISTRATION FORM**

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| **Business Owner Contact Details** | | | | | | | |
| **Title:** |  | **First Name:** | |  | **Surname:** |  | |
| **Address:**    **Postcode:** | |  | | | | | |
|  | | |  | | |
| **Contact Number:** | |  | | | **Contact Email:** |  | |
| **Business Details** | | | | | | | |
| **Business/Trading Name:** | | |  | | | | |
| **Business/Trading Address:** | | |  | | | | |
| **Business/Trading Postcode:** | | |  | | | | |
| **Business Phone:** | | |  | | | | |
| **Business Email Address:** | | |  | | | | |
| **Business Website and/or Social Media Address:** | | |  | | | | |
| **Legal Status (select one):** | | | Sole Trader  Partnership  Limited Company  Social Enterprise  Other (please state): | | **Trading Internationally?** | | Yes  No |
| **SME? (see notes at end if unsure)** | | Yes  No |
| **Current Estimated Turnover** | |  |
| **Current staff no’s** | |  |
| **Sector:** | | |  | | **Do you currently sell your products/services online?** | | Yes  No |
|  | | |  | | **Do you plan to sell your products/services online?** | | Yes  No |
| **Business Description:** | | | Please provide a brief overview of the business & products/services which are offered. Where you primarily sell and what countries, if any, you sell in other than Scotland. | | | | |
| **What is your biggest digital challenge at the moment?** | | |  | | | | |

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| **Subsidy Control – Minimum Financial Assistance (MFA)** | |
|  | The Digital Upskilling Support being applied for by your Business is classified as a Minimum Financial Assistance (MFA) subsidy under the [Subsidy Control Act (2022).](https://www.legislation.gov.uk/ukpga/2022/23/enacted)    To be eligible for the support, you **must not** have already exceeded receipt of £315,000 in MFA subsidies over this and the previous two financial years.    ***Note: Minimal Financial Assistance (MFA) is a relatively new term which you may have previously seen referred to as “De Minimis” or “Special Drawing Rights” SDR***    Before making any payment, written confirmation that receipt of the payment will not exceed [Enter Business Name]’s MFA threshold of £315,000 cumulated over this and the previous two financial years, as specified in section 36(1) of the Subsidy Control Act (2022), is required.    This means you must confirm you have not received more than [£315,000 minus the value of this subsidy] in MFA subsidies or comparable types of subsidy (see section 42(8) of the Subsidy Control Act (2022)) between the current and previous two financial years.    We take this opportunity to remind [Enter Businesses name] that you are required to keep a written record of the amount of MFA you have received and the date/s when it was received. The written record must be kept for at least three years beginning with the date on which the MFA was given. This will enable you to respond to future requests from public authorities on how much MFA you have received and whether you have reached the cumulative threshold.    Once you have received the requisite Digital Upskilling support from our consultants, we will issue you with a letter which you can use as your written confirmation.  Please confirm amounts of any previous public sector funding/support received:   |  |  |  |  | | --- | --- | --- | --- | | Current Year 2023/24 | 2022/23 | 2021/22 | 2020/22 | | £ | £ | £ | £ | |  |  |  |  | |

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| **Privacy Policy & Data Protection Notice** | |
| [Privacy Policy | Elevator UK](https://www.elevatoruk.com/privacy-policy/) (<https://www.elevatoruk.com/privacy-policy/> ) | |
| **Data Protection Notice (continued)** | |
| **Marketing Consent:** We would like to keep you updated with the latest Elevator events, news, and services. To do this, we need your consent to send you marketing updates. You can withdraw your consent to this at any time.  Please let us know that you are happy for us to send you marketing updates by entering the date below and ticking the boxes to select your marketing contact preferences. | |
| **Consent to marketing date (DD/MM/YY):** |  |
| **Contact preferences:** | Email  Bulk email  Phone call  Mail |
| **How you can request that information about you is removed:** If at any time you wish your details to be removed from our database please contact Elevator in writing to Thainstone Business Centre, Thainstone, Inverurie, AB51 5TB or by e-mailing [**info@elevatoruk.com**](mailto:info@elevatoruk.com) or you can call us on **01224 289700**. When contacting us please provide: | |
| **Equal Opportunities Monitoring** | |
| Under the Enterprise Act, local government has an obligation to collect Equal Opportunities information for the purpose of ensuring fairness and transparency in service delivery to all sections of the community. Completion of the above information will allow us to monitor the uptake of our services and help us to achieve this commitment. All responses are optional.  **Gender**:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Male |  | Female |  | Prefer not to say |  |   Trans Status\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Your date of birth  **Ethnic origin**: please tick one of the following  **White**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Scottish |  | Other British |  | Irish |  | | Other |  |  |  |  |  |   **Asian or Asian British/Scottish**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Pakistani |  | Indian |  | Bangladeshi |  | | Chinese |  | Other |  |  |  |   **Black or Black British/Scottish**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | African |  | Caribbean |  | Other |  |   **Mixed**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | White/Black African |  | White/ Caribbean |  | White/Asian |  | | Other |  |  |  |  |  |   **Other**   |  |  | | --- | --- | | Other ethnic background |  | | Prefer not to say |  |   **Sexual Orientation**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | heterosexual / Straight |  | Gay / Lesbian |  | Bisexual |  | | Other |  | Prefer Not to Say |  |  |  |   **Disability**  Do you have any long-term illness, health problem or disability that limits your daily activities or the work you can do?   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Yes |  | No |  | Prefer not to say |  |   **Employment status**  Are you currently:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Employed |  | Unemployed |  | Prefer not to say |  |   **Barriers to Employment**  Please select any barriers to employment that apply:  Current substance abuse  Care experienced  Caring responsibilities  At risk of becoming NEET (young people not in education, employment or training)  From employment deprived area  From remote rural area  From rural area  Living in a jobless household  Living in a jobless household with dependent children  Long term physical illness  Long term unemployed  Care experienced  Looked after young person  Low Income Employed  Low Income Household  Low Skilled  Mental health issues  Migrants people with a foreign background, minorities (including marginalised communities such as the Roma)  Primary carer of a child/children (under 18) or adult  Underemployed | |

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| **Client Declaration** | |
| **Client Name:** |  |
| **Signature:** |  |
| **Organisation:** |  |
| **Position in Organisation** |  |
| **Date:** |  |
| *Please note a signature is required*  The Empower Digital GrowthProgramme is in partnership with Dundee City Council and funded by the Scottish Government. | |

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**Notes For Completion**

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| **SME Status Confirmation Check** |
| To determine if the business is an SME, please complete the details below:  Business Name:  Company Registration Number:  Does the business issue abbreviated accounts: YES/NO  **If Yes**, go to **Question 4**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Question 1:** Does the business have less than 250 employees? YES/NO  **Question 2:** Does the business turnover €50m (£42.5m) or less? YES/NO  **Question 3:** Does the annual balance sheet €43m (£36.5m) or less? YES/NO  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Question 4:** Is the business autonomous?  **(A)**The business does not hold 25% or more (capital or voting rights) in another business?  YES (SME is autonomous) / NO (SME holds a 25% or greater interest in another enterprise)  (**B)** Another business does not hold 25% or more of the enterprise?  YES (SME is autonomous) / NO (another business has a 25% or greater holding of the SME)  If you answered **YES** to all of the questions above, the business meets the EU definition of an SME.   |  | | --- | | If the company issues abbreviated accounts and **‘Yes’ to Q4.A and B** the business **is an SME** | | If answered **‘No’** to **Q.1, Q.2 or Q.3** the business is **not considered an SME.** | | If answered **‘Yes’ to Q.1 – Q.3, and ‘Yes’ to Q.4 A and B** e.g. the business is an SME | | If answered **‘Yes’ to Q.1 – Q.3,** or issues abbreviated accounts, **but ‘No’ to Q.4 A or B** e.g. the business is not autonomous, **please answer the questions below**. |   **Question 5:** Is the enterprise a Partnership (>25% but less than 50% interest in, or held by another business)? YES/NO  If **NO**, go to **Question 6**  **Question 6**: Is the enterprise a Linked enterprise (50% or more interest in or held by another business)?  If **YES** **to Question 5 or Question 6**, the company may still be an SME, please complete a further SME Verification Check on the company which ultimately owns the applicant.  **Outcome:**  The applicant is:  An SME  Not an SME  Further information is required |