***TRAINING MANUAL***

By:

Date

Publisher

***Introduction***

**About this Manual**

**About the Training Program**

**Content of the Manual**

***Target Groups***

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***Sustainable Communities***

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***Business Skills***

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***Creating a Learning Space***

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***Training Activities***

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***Training Delivery***

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***Materials***

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***Training Frame***

**Day 1**

**Day 2** **Day 3**

***The Business Plan***

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***Business Ideas***

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***Evaluation***

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| **HOW CAN WE IMPROVE?** |  |  |  |
| What topic was missing? |  |  |  |
| What topic could we leave out? |  |  |  |
| What topic should we spend more time on? |  |  |  |
| What topic should we spend less time on? |  |  |  |
| How could we improve the training? |  |  |  |
| What should we remember next time? |  |  |  |
| **WHAT SKILLS DO YOU HAVE NOW?** |  |  |  |
| How confident do you feel about the following task: |  |  |  |
| I know how to fill out the business plan | No! | Not sure | Yes! |
| I know how to fill out the money plan | No! | Not sure | Yes! |
| I know how to repay a loan | No! | Not sure | Yes! |
| I know how to take out money for living | No! | Not sure | Yes! |
| I know how to choose my marketing mix | No! | Not sure | Yes! |
| I know how to make my business sustainable | No! | Not sure | Yes! |
| I know how to start a business | No! | Not sure | Yes! |



|  |  |  |  |
| --- | --- | --- | --- |
| **HOW FAR DID YOU GET?** |  |  |  |
| How far did you get with your business plan? | Not started | On my way | Completed |
| How far did you get with your money plan? | Not started | On my way | Completed |
| Do you plan to apply for a micro loan? | No | Maybe | Yes |

What is your greatest challenge to starting a business?

***Conclusion***

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