

CGU Kayku Kumpa Mentoring Program

Application Form

2020

All applicants must complete this form and be prepared to participate.

Business details	
Business Name*	
Industry*	
Brief description of your product or service*	
Business website	
How many years has your business been in operation?*	
Are you a CGU Business Insurance Customer?	
Which business insurance products do you currently have with CGU?	
Which business insurance products do you currently have with another provider?	
Primary Contact Details	
First name*	
Last name*	
Position/Title*	
Contact email*	
Contact phone*	
Address*	
Suburb/Town*	
State/Territory*	
Postcode*	
Social media profiles	
Number of Employees* (Full and Part Time)	
Geography	
Does your business have a national, state or local focus?*	
What was the annual turnover of your business prior to COVID19?*	
What is the current monthly turnover of your business during COVID19 situation?*	

SME Focus

Who is your target audience?*	
What is the main funding source for your service or product?*	
What are top 3 risks facing your business right now* This can be anything such as business continuity, severe weather impacts etc.	
How concerned are you about the survival of your business?*	
Please select one from: Very concerned, Quite concerned, Not that concerned, Not at all concerned	
How concerned are you about your personal health and wellbeing?*	
Please select one from: Very concerned, Quite concerned, Not that concerned, Not at all concerned	
What are your top three business goals for the next 12-24 months?*	
How would this mentoring Initiative help you to reach your goals?* Please Include some key topics you'd like to discuss.* (eg leadership skills, moving business online, strategy, distribution, branding)	
How did you hear about this initiative?	Please tick all that apply: <ul style="list-style-type: none">• Media editorial• Referral• Social media• Email• Other:

Applicant Declaration

<p>I understand that my personal information will be collected, used, held and disclosed in accordance with the CGU Privacy Policy.</p> <p>I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, true, accurate and complete.</p> <p>I declare that I am authorised to complete this form and to sign and submit this declaration on behalf of the applying business.</p>	<p><input type="checkbox"/> By checking this box I agree to all of the above declarations and confirm all of the above statements to be true.</p>
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I understand that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that CGU may also engage external technical or financial advisors to advise on information provided in the application.

I understand that CGU may:

- a. share information in this application with its agencies and third-party suppliers for any purposes including research and communication service delivery;
- b. publish non – sensitive information in this application in the public domain, including on its website and marketing and promotional materials; and
- c. use my information to contact me about updates and offers from CGU.

*mandatory field