**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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