

## APPLICATION GUIDELINE FOR DARe'S LINKAGE PROGRAMME

General eligibility criteria:

- Must be either Foreign Direct Investment/Government-Linked Companies/Multi-National Corporations and/or corporate organization that is locally incorporated.
- Must have commitment from top management to be part of the Linkage Programme.
- Must have internal champion/s who promote local purchasing.
- Has the resources to provide coaching and mentorship to linked MSMEs is an advantage

## FORM OF ASSISTANCE

DARe will offer facilitation of linkage between large companies and Brunei MSMEs by providing effective selection mechanism to requested criteria from large companies whilst providing training opportunities and financing supports to further develop participating vendors selected for the linkage.

## APPLICATION FORM CHECKLIST

- ☐ Completed Application Form
- ☐ Copy Of Registration of Companies and Business Names (Form 16/17, Form X)

### A. COMPANY PROFILE

Company Name	
Business Registration No.	
Business Address	
Website	
Type of large company	<input type="checkbox"/> FDI <input type="checkbox"/> GLC <input type="checkbox"/> MNC <input type="checkbox"/> Corporate organization
Year Of Establishment	
Country Of Origin	
Number Of Employees	

### B. ACTIVITY DESCRIPTION

Sector of Activity	
Key products/services	
Core business activity	
Export activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
Main export markets	
Key customers	

**C. LINKAGE DETAILS**

Please describe the form of linkages you are looking for:	<input type="checkbox"/> Activity outsourcing <input type="checkbox"/> Joint Ventures <input type="checkbox"/> R&D Outsourcing <input type="checkbox"/> Representative Office <input type="checkbox"/> Licensing agreement <input type="checkbox"/> Linkage with supplier <input type="checkbox"/> Other: _____
Please describe the activities you would like to outsource (if any)	
Please specify your requirements (INDUSTRY EXPERTISE, TECHNOLOGIES, STANDARDS CERTIFICATION, ETC.)	
What are the expected benefits from linkages:	<input type="checkbox"/> Reduce cost <input type="checkbox"/> Deliver on time <input type="checkbox"/> Access new markets <input type="checkbox"/> Enhance quality of products <input type="checkbox"/> Other: _____
Comments:	

**D. CONTACT DETAILS**

Contact person	
Position	
Phone	
Email Address	

**E. DECLARATION**

I declare that the facts in this application and the accompanying information are true. I understand that Darussalam Enterprise (DARe) will facilitate the linkage process according to the requested criteria provided by the large company. Selection of MSMEs will be objectively assessed based on information provided through vendor registrations and affiliations with DARe's programmes. DARe will remain impartial and final selection of MSMEs will be solely decided by the large company.

\_\_\_\_\_  
Authorised Signature (with company stamp)

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Company Name: \_\_\_\_\_