

TEAR OFF AND BRING TO CENTRE

ARE YOU IN BUSINESS,
YES OR NO? IF YES,
WHAT KIND OF BUSINESS
ARE YOU OPERATING?

IF NO, DO YOU INTEND TO
START A BUSINESS?
WHAT KIND OF BUSINESS
DO YOU INTEND
TO START?

WHERE DID YOU HEAR
ABOUT THE YEDP?:

WHY DO YOU WISH TO
JOIN THE PROGRAMME?

WHAT ARE YOUR
FUTURE GOALS?

DATED:

SIGNED:

OFFICE CONTACT DETAILS AND ENQUIRIES

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For Enquiries:

Department of Economic Development and
Community Services
Economic Development Division

City of Windhoek



**WINDHOEK YOUTH
ENTREPRENEURSHIP**



The Gateway to Endless Opportunities

JOIN YEDS TODAY



Our Vision

A productive socio-economic and participative city youth, who are aware of their educational prospects, economic potential and contribute towards the local economy.

Our Mission

Play an active role through the continuous initiation of youth development activities and educational sessions, with the aim of encouraging active participation amongst the youth, and facilitating self employment and empowerment.

Our Strategic Objectives

1. To increase the number of sustainable youth owned and managed enterprises.
2. To increase the active participation of young people within the local economy.
3. To increase the access of business support services and markets by youth owned and managed enterprises.



Our Three Pillars and Desired Outcomes

1. Youth Enterprise Development
 - Skilled and Equipped young business leaders.
2. Active Participatory approach
 - Civic engagement and youth empowerment.
3. Marketing support and Business linkages
 - Sustainable partnerships and networks forged.

Youth Entrepreneurship Development Programme (YEDP) Registration Form

FIRST NAME:

MIDDLE NAME(S):

SURNAME:

IDENTITY NO.:

PHYSICAL ADDRESS:

POSTAL ADDRESS:

NAME OF YOUR
CONSTITUENCY:

MOBILE NUMBER:

EMAIL:

GENDER:
(TICK CORRECT BOX) MALE ☐ FEMALE ☐