

# IBA ELP Consent Form

Company Name

Year of Establishment

Core Products & Services

Nature of Company

 Public Private Partnership NGO Others

Official/Postal Address

Company Website

Number of Employees currently on board

Name of the Contact Person

Designation/Positon

Email Address

Contact Number

Background of the project

Main objectives / tasks you want to achieve through this project

**Areas of investigation**

- New ventures / Feasibility Studies
- Management Control Systems
- Human Resource Restructuring
- Strategic Analysis & Management
- Marketing Strategy
- Supply Chain Management
- Resource Mobilization strategies
- Financial Management
- Process re-engineering and Change Management
- Other. Please Specify

**Geographic scope and location**

**Project Output/Deliverables**

**Which resources will be accessible/allocated to the project associates?**

**Distribution of Tasks/Timelines/Schedule**