

Trade Mission to Boston Applicant Detail Form February 7–25, 2022

Business Name: _____
(Legal registered name)

Contact Name: _____

Title: _____

Mailing Address: _____

City: _____ Postal Code: _____

Telephone Number: _____

Mobile Number: _____

Email: _____

Website: _____

Sector: _____

When was your business established (YYYY): _____

Total revenue (Last fiscal year): _____

Total revenue (Two years ago): _____

Total revenue from outside Nova Scotia (Last fiscal year): _____

Total revenue from outside Nova Scotia (Two years ago): _____

Total number of Nova Scotia Full Time Equivalents (FTEs): _____

Products/Services your business offers:

Goals and Objectives for your participation in this trade mission: