## APPLICATION FOR FREE OFFICE SPACE - UPTO 3 DAYS/WEEK

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|---|
| FULL NAME: |
| BUSINESS NAME: |
| EMAIL ADDRESS: |
| WEBSITE: |
| CONTACT NUMBER: |

Is your business female-led? Yes ☐ No ☐

Has your business been operating less than 24 months? Yes ☐ No ☐

How regularly would you use the work space?

Unfortunately there is stair only access to York Hub, could this be an issue? Yes ☐ No ☐

How did you hear of this opportunity?

Were you previously aware of York Hub?

Have you visited York Hub? Yes ☐ No ☐

Please tell us about your business

Why did you apply for this opportunity?

What key benefits would working from York Hub offer you and your business?

What do you think makes you a good potential York Hub coworker?

Is there anything else you would like to tell us?