

AIAC Accreditation Application Form for African Owned Sole Proprietors Businesses

Empowering Africa's Sole Proprietors and Emerging Entrepreneurs

The African Institute for Accreditation and Compliance (AIAC) was founded to champion the growth and credibility of Africa's sole proprietors, micro-businesses, and emerging entrepreneurs—especially those pursuing a development-oriented or ethical mission. In a dynamic and fast-changing continent, where small businesses drive innovation and job creation, AIAC supports individuals who seek to build public trust through transparent, accountable, and sustainable practices.

We recognize that entrepreneurs and sole proprietors are the backbone of Africa's economic future. That's why AIAC focuses on nurturing a culture of integrity, responsible enterprise, and harmonized quality standards at the grassroots level. Whether you are starting small or scaling your venture, our accreditation affirms your commitment to professionalism and ethical conduct.

Grounded in the principles of stewardship, fairness, and sustainable impact, AIAC helps business owners demonstrate their dedication to ethical leadership, compliance, and alignment with both local and global expectations. We believe Africa's prosperity depends on trusted, credible, and consistent enterprises—regardless of size.

Accreditation Validity & Renewal

AIAC accreditation is valid for one year. All accredited sole proprietors and businesses undergo an Annual Review and must submit a renewal application with updated documentation and a standard renewal fee.

Seal of Trust

The AIAC Seal of Accreditation is a recognized symbol of credibility, ethical business, and quality standards. It is the intellectual property of AIAC and may only be used by individuals and businesses in good standing who meet all compliance requirements.

AIAC ACCREDITATION APPLICATION FORM FOR AFRICAN OWNED SOLE PROPRIETORSHIPS

SECTION 1: BUSINESS	SINFORMATION		
Business Name (As lega	ally registered):		
Date Business Started:			
Business Registration N	lumber (if applicable):		
Physical Address:			
Mailing Address (if diffe	erent):		
City:	Country:	Postal Code:	
Phone Number:			
Business Email Address	:: ::		
Tax Identification Numl			
SECTION 2: OWNER D	DETAILS		
Full Name of Sole Prop	rietor:		
Prefix (Mr., Mrs., Dr., et	tc.):		
Phone Number:			
Email Address:			

National ID / Passport Number:			
SECTION 3: BUSINESS OVERVIEW			
Brief Description of Business Activities (Max 100 words):			
SECTION 4: MISSION & VISION			
Mission Statement:			
Vision Statement:			
SECTION 5: ADDITIONAL INFORMATION			
Do you have any business branches or operations under different names?			
□ Yes □ No			
If yes, list them here:			
If yes, list them here:			
SECTION 6: REQUIRED DOCUMENTS CHECKLIST			
Please attach the following documents with your application:			
☐ One-time application fee of 250 USD (refer to membership plan)			

☐ Completed and signed application form
☐ Recent reference letter (from a donor, accredited member, or partner)
☐ Scanned copy of business registration/certificate
□ Owner's ID or passport
☐ Business profile (if available)
☐ Most recent annual financial summary/report
□ Tax exemption certificate (if applicable)
SECTION 7: COMPLIANCE STATEMENT
As an organization applying for accreditation by the African Institute for Accreditation and Compliance (AIAC), we affirm that all information provided in this application and its accompanying documentation accurately represents our operational, financial, and governance practices. We further affirm our commitment to uphold the principles, standards, and values promoted by AIAC, including
transparency, accountability, and sustainable development. We agree to abide by the terms and conditions
outlined in the AIAC Letter of Engagement, governing both the application process and our ongoing relationship
with AIAC upon accreditation.
We understand that accreditation is contingent upon our continued compliance with AIAC standards and that any
misrepresentation or breach of compliance may result in the suspension or revocation of our accreditation status.
By signing, you acknowledge your affirmation of the Statement of Compliance.
Name of applicant
Business's Name
Date

SECTION 8: HOW DID YOU HEAR ABOUT AIAC?	
☐ Forum/Conference	
□ Radio/TV	
□ Donor	
□ Referral	
☐ Accredited Member	
☐ Social Media	
☐ Other (specify):	
(**All documents are to be submitted in PDF format, if possible, to info@aiacinstitute.org applications@aiacinstitute.org	/
or WhatsApp +1 (520) 473-4353	

Signature_____