

Franchise Application Form

The completed form needs to be scanned and emailed to franchise@sheerguard.co.za, upon receipt of your application you will be contacted with further informaatn.

Additional d cumentaaon required:

- Copy of ID document

Which area are you applying for?

B – Work / Employment History

Please provide us with your brief work / employment history:

Please provide details of your highest qualificaaon achieved:
Qualificaatn:
Year Completed:
Institutio
C – Industry Background
Experience in industry related to SheerGuard or which may qualify you as a possible franchisee:
Physical security - burglar bars, gates
Other security – state which:
Home improvements – state which:
Constructon:
Engineering :
Shon-fitt :

A - Personal Information

Note: All information supplied in this quessonnaire will be used solely for the purpose of assessing your suitability as a franchisee and will be kept confidennti.

Title:	
First Name:	
Last Name:	
ID no:	
Date of Birth:	
Nationalty:	
Physical Address:	
Area Code:	
Postal Address:	
Area Code:	
Office Tel:	-
Cell:	-
E-Mail:	

Please write a 1 paragraph moti aation to why you would be an asset to the SheerGuard Brand				
E - Financial Information				
Have you ever been insolvent (circle):				
YES NO DATE				
If "YES": State whether rehabilitated (circle):				
YES NO DATE				
Will you require financial assistance to purchase a franchise?				
YES NO				

Any other experience which may relevant:					

D-Skills Self Assessment

Please complete an assessment of your own skills and circle result in each of the areas below;

Management Skills	Poor	Average	Good	Excellent
Communicati n Skills	Poor	Average	Good	Excellent
Planning Skills	Poor	Average	Good	Excellent
Promotonal Skills	Poor	Average	Good	Excellent
Sales Skills	Poor	Average	Good	Excellent
Marketin Skills	Poor	Average	Good	Excellent
Computer Skills	Poor	Average	Good	Excellent
Training Skills	Poor	Average	Good	Excellent

F - CONFIDENTIALITY UNDERTAKING

I am interested in exploring the possibility of acquiring a franchise from SheerGuard SA and have requested SheerGuard SA to supply me with informati n (Confidenent Informarmatito assist me in arriving at a decision.

1.

Confideentiaty Undertaking

I undertake in favour of SheerGuard SA that I will:

- 1.1 use the ConfidenntialInformamati only for the purpose for which it was supplied; and
- 1.2 take all reasonable steps to keep the Confidennti Informamat secret and, without limiting the generality of the aforegoing, I undertake not to disclose the confidenntial formamon to persons other than those who are required to know it and who have been placed under an obligation to keep the said information confidenntial.

 1.3 I agree to sign an Undertaking of Secrecy form should I wish to investigate further.

2.

Exclusions

My undertaking does not apply to information which is public knowledge or becomes publically known otherwise than as a consequence of a breach of this undertaking.

3.

Public Announcements

I agree not to publicise the fact that I am investgaati	the possibility of acquiring a SheerGuard SA
franchise.	

Signature :	 	 	
Full Names: _			
_			
5 .			
Date :			