



Franchisee application form

Kindly fill in all the applicable information in the spaces provided and submit to us before the stipulated deadline. The information you provide will be held in the strictest confidence and completion of this form in no way constitutes a commitment to Sidai Africa or that a franchisee applicant will be automatically awarded. We encourage you to share any and all relevant information and include anything that you find will make your candidacy stand out as a potential franchisee. Thank you again for your interest in Sidai Africa.

Where do you wish to Operate:	<input type="text"/>
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Section 1. Details of applicant

Surname: <input type="text"/>	Other names: <input type="text"/>	Gender: <input type="radio"/> Male <input type="radio"/> Female
DOB: <input type="text"/>	Marital-Status: <input type="text"/>	ID/Passport no: <input type="text"/>

Contact Address

Postal address: <input type="text"/>	Code: <input type="text"/>	Town/City: <input type="text"/>
Telephone: <input type="text"/>	Mobile: <input type="text"/>	Fax: <input type="text"/>
E mail:	<input type="text"/>	

Physical address

Location: <input type="text"/>	Estate/house-no: <input type="text"/>
Duration of stay at current location:	<input type="text"/>

Section 2: Business Information

Name of Business:	<input type="text"/>
Address:	<input type="text"/>
Business location:	
<input type="radio"/> Market	
<input type="radio"/> Office	
<input type="radio"/> Town	
<input type="radio"/> Home	
<input type="radio"/> Other	<input type="text"/>

Section 2: Business Information

Name of Business:

Address:

Business location:

Market

Office

Town

Home

Other

Legal entity:

Sole Proprietor

Partnership

Limited Company

Other

Length of ownership:

Start-up (<1 yr)

1-5 yrs

5-10yrs

> 10 yrs

Percent ownership (For partnerships and Limited Companies):

Section 3: To be filled only by Startups (<1year operation) Existing businesses proceed to section 4.

3.1 Professional Education, qualifications and training:

Institution	Qualifications achieved	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

3.2 Employment history (if any)

Organization	position	Relevant experience
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

3.3 Are you a member of any professional body: If yes, Please indicate below.

3.4 Will you operate with a partner? Y/N If yes please give details and their nature of involvement in your operations.

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3.5 Have you made any attempt at starting your own business? If yes give a brief description of your experience.

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3.6 In about 400 words please describe what you feel are the current problems in your region and what solutions would you and your potential business be able to offer in relation to our previous experience. What challenges do you anticipate and how do you propose to overcome in partnership with Sidai

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3.7 Have you developed a business plan for your operations? If yes please attach(email together with filled form)

• Do you have access to capital? How do you intend to finance your investment?

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• Are you willing to work in a Sidai outlet to gather the necessary business experience required to run your own outlet? lect...

3.8 List 3 farmers and their contacts who can attest to your experience and commitment to offer livestock services and what areas you helped them in managing their operations.

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3.9 Provide any other information that you think will be relevant in helping your application be successful.

Section 4: To be filled by Existing businesses

4.1 Period of trading at the current address

- 1-5 yrs
- 5-10 yrs
- > 10 yrs

4.2 What has been your previous trading performance (gross turnover in Ksh/year)

2011 to date	
2010	
2009	

4.3 Please list your current major suppliers, monthly volume of business and terms of trade.

Supplier	Average monthly turnover	Terms of trade

4.4 How many staff do you currently have and what are their qualifications?

Staff Name	Qualification/Responsibility	Duration of employment

4.5. How do you keep your staff well motivated and updated on their skills requirement?

4.6 In 400 words, describe in brief the current nature of your business operations with focus on business planning , customers, competition, stock management, financial planning strategies and future growth plans .

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4.6.1 How many customers and types would you estimate you are currently servicing? (dairy, Poultry, pastoralists etc)

4.6.2 What is your motivation for changing your outlet from an independent business into a franchise?

4.6.3 In what areas do you think your company will benefit from its partnership with Sidai and vice versa?

4.6.4 Has your company ever been involved in any form of litigation? Y?N If yes please give details.

Section 5. To be filled by all applicants

Financial information.

All financial information given will be treated with strict confidentiality.

Assets	Ksh	Liabilities	Ksh
Cash	<input type="text"/>	Loans	<input type="text"/>
Investments	<input type="text"/>	Accounts payable	<input type="text"/>
Business value	<input type="text"/>		<input type="text"/>

Others

Assets	Ksh	Liabilities	Ksh
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Financial information.

All financial information given will be treated with strict confidentiality.

Assets		Ksh	Liabilities		Ksh
Cash	<input type="text"/>	<input type="text"/>	Loans	<input type="text"/>	<input type="text"/>
Investments	<input type="text"/>	<input type="text"/>	Accounts payable	<input type="text"/>	<input type="text"/>
Business value	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Others

Assets		Ksh	Liabilities		Ksh
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Net Worth Value

Assets	Ksh	Liabilities	Ksh
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

The submission of this application does not obligate me or Sidai Africa in any way or manner.

Name: Sign date