

*Thank you for your expression of interest in acquiring a Duco Scratch franchise.*

The intention of the attached form is to help determine your suitability as a Duco Scratch franchisee.

Duco Scratch will use the form as the basis for a number of decisions regarding your application, and it is therefore a fundamental requirement that the information you've given us is true, accurate and not in any way misleading.

To clarify your financial position you may be requested to produce proof of your financial situation.

All information in the form will be kept in strict confidence and is only for the purpose of assessing the applicant(s) as a Duco Scratch franchisee. Please complete the form in full; failure to do so may result in the application being rejected.

The Expression of Interest does not obligate either party in any manner.

## 1. Applicant information

Surname (block letters) \_\_\_\_\_ Title (Mr, Mrs, Miss, other) \_\_\_\_\_

First names (in full) \_\_\_\_\_

### Permanent address

Street No. \_\_\_\_\_

Street name \_\_\_\_\_

Suburb postcode \_\_\_\_\_ State \_\_\_\_\_

Telephone No. (Home) ( ) \_\_\_\_\_ Telephone No. (Business) ( ) \_\_\_\_\_

Mobile No. \_\_\_\_\_ Fax No. (Home) ( ) \_\_\_\_\_

Email address \_\_\_\_\_

Place of birth \_\_\_\_\_ Date of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

### Previous address (if resident at Permanent address for less than 2 years)

Street No. \_\_\_\_\_ Street name \_\_\_\_\_

Suburb postcode \_\_\_\_\_ State \_\_\_\_\_

Will your spouse/partner be involved in the business? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, in what capacity? \_\_\_\_\_

NB: If spouse/partner is to be involved with the business they must complete the spouse/partner section at the back of the form.

Surname (block letters) \_\_\_\_\_ Title (Mr, Mrs, Miss, other) \_\_\_\_\_

First names (in full) \_\_\_\_\_

Owning and running a Duco Scratch franchise is both physically and mentally demanding. Have you ever suffered from any physical or mental condition or do you currently have any disabilities or limitations which may affect your ability to meet these demands? Yes \_\_\_ No \_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

## 2. Education, Skills, Work or Business History and Interest

Please attach your current CV and be sure to include the information below.

Please attach a current CV showing details of your education, qualifications, skills, and work history plus any additional information, skills, qualifications or interests you have which would be relevant to your owning a business. Your CV will need to include the following information about your employment history. The table below is provided as an example of the information required. Include both full-time and part-time employment and include periods of self-employment. Please start with your current job.

From/To \_\_\_\_\_

Company name and address \_\_\_\_\_

Job title \_\_\_\_\_

Description of role/achievements/main responsibilities \_\_\_\_\_

\_\_\_\_\_

Have you ever been dismissed, suspended or required to resign? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

### Details of present business if self-employed

Type of business \_\_\_\_\_

Business name \_\_\_\_\_ ABN No \_\_\_\_\_

Address of business \_\_\_\_\_

## 3. Legal Information

Do you have any criminal convictions or impending prosecutions? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

Have you ever had a court judgment against you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

If required, are you prepared to provide a Police Certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

(A Police Certificate provides details of any criminal history)

#### 4. Business skills, Approach & Motivation

Do you enjoy working with people?

Yes \_\_\_\_\_

No \_\_\_\_\_

What do you believe are your strengths in business?

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Are there any areas in which you feel that you any require assistance/training? (e.g. sales skills, accounting, people management etc)

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What are your 3 key achievements in your career/business?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Are you prepared to be personally committed to this business and are you prepared to work hard to achieve your business goals?

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What motivates you for success in business?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

What are the key factors for excellent customer service?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

To what extent have you been involved in sales during your business life?

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How would you describe yourself?

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Why do you believe Duco Scratch should grant you the rights to purchase a franchise?

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Have you investigated any other franchise opportunities? If so, who and what is your assessment of them?

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## 5. Declaration

I certify that the above information is correct and complete to the best of my knowledge and belief. I acknowledge that incorrect information could render me liable to having the franchise terminated. I acknowledge and give my consent in terms of Privacy Legislation for Franchisor to obtain further information about the above matters.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

## 6. Spouse/Partner Information

Surname (block letters) \_\_\_\_\_

Title (Mr, Mrs, Miss, Other) \_\_\_\_\_

First names (in full) \_\_\_\_\_

### Permanent address

Street No. \_\_\_\_\_

Street name \_\_\_\_\_

Suburb postcode \_\_\_\_\_

State \_\_\_\_\_

Telephone No. (Home) ( ) \_\_\_\_\_

Telephone No. (Business) ( ) \_\_\_\_\_

Mobile No. \_\_\_\_\_

Fax No. (Home) ( ) \_\_\_\_\_

Email address \_\_\_\_\_

Place of birth \_\_\_\_\_

Date of birth \_\_\_\_\_

Citizenship \_\_\_\_\_

Owning and running a Duco Scratch franchise is both physically and mentally demanding. Have you ever suffered from any physical or mental conditions or do you currently have any disabilities or limitations which may affect your ability to meet these demands? Yes \_\_\_ No \_\_\_

If yes, please give details \_\_\_\_\_

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## 7. Education, Skills, Work or Business History and Interest

Please attach your current CV and be sure to include the information below.

Please attach a current CV showing details of your education, qualifications, skills, and work history plus any additional information, skills, qualifications or interests you have which would be relevant to your owning a business. Your CV will need to include the following information about your employment history. The table below is provided as an example of the information required. Include both full-time and part-time employment and include periods of self-employment. Please start with your current job.

From/To \_\_\_\_\_

Company name and address \_\_\_\_\_

Job Title \_\_\_\_\_

Description of role/achievement/main responsibilities \_\_\_\_\_

\_\_\_\_\_

### Details of present business if self-employed

Type of business \_\_\_\_\_

Business name \_\_\_\_\_ ABN No \_\_\_\_\_

Address of business \_\_\_\_\_

## 8. Legal Information

Do you have any criminal convictions or impending prosecutions? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

Have you ever had a court judgment against you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

If required, are you prepared to provide a Police Certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

(A Police Certificate provides details of any criminal history)

## 9. Declaration

I certify that the above information is correct and complete to the best of my knowledge and belief. I acknowledge that incorrect information could render me liable to having the franchise terminated. I acknowledge and give my consent in terms of Privacy Legislation for Franchisor to obtain further information about the above matters.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

### Checklist

1. Have you completed every section of the form?
2. Have you attached a copy of your CV?
3. Have you signed the declaration?
4. Have you signed the Non-Disclosure Agreement?

If you have ticked the above, please **fax** all items to **07 5549 1437** or return to:

**Duco Scratch Pty. Ltd.**

**Unit 4**

**8 Hopper Ave**

**Ormeau QLD 4208**