



## APPLICANT BACKGROUND SUMMARY

Please complete and return BEFORE your interview. No discussions will be entered into with applicants who decline to provide this basic information. Fax to SKIDS head office on (09) 5769902

This form has been designed to allow you to present your personal information in a clear format. Each section must be completed with as much detail as possible. Any personal information provided to Safe Kids in Daily Supervision Ltd in your application will only be used by us for the purpose of assessing your suitability to become a SKIDS Franchisee.

### NOTE:

*The provision of this information places no obligation upon either the applicant or Safe Kids in Daily Supervision Ltd. The information will be treated in the strictest confidence and will not be discussed in full or in part to anyone.*

### Personal Information

Full name: \_\_\_\_\_

Spouse/Partner: \_\_\_\_\_ No. of Dependents: \_\_\_\_\_

Home Address: \_\_\_\_\_

How long at this address? \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Business Experience

Have you owned your own business previously? Yes/No

If yes then please describe the type and nature of the business and your involvement in it.

---

---

---

---

If no then have you had any supervisory experience? Please describe.

---

---

---

---

Have you ever failed in a business or had problems with creditors?

---

---

---

Do you have any lawsuits pending against you? Yes/No

Have you ever been convicted of a criminal offence? Yes/No

How would you rate your entrepreneurial abilities? (Please circle)

Low    Average    Good    Very Good    Excellent

How would you rate your decision-making abilities? (Please circle)

Low    Average    Good    Very Good    Excellent

How would you rate your willingness to learn new ideas? (Please circle)

Low    Average    Good    Very Good    Excellent

Why do you think you would make a successful SKIDS Franchisee?

---

---

---

---

---

Do you intend working in your programme or hiring a manager to run it for you?

---

**Referees**

1. Business Reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Character Reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

- I authorise Safe Kids in Daily Supervision Ltd to contact these referees anytime.
- I authorise Safe Kids in Daily Supervision Ltd to contact these referees **only after my initial interview.**

**Commitment**

Are you able to commit to a minimum of 30 hours per week to work on a SKIDS Franchise?

Yes / No (circle one)

If approved, when would you like to start your Franchise? \_\_\_\_\_

Is there anything else you would like to tell us about yourself which you believe is relevant to this application?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please note:** This application in no way obligates Safe Kids in Daily Supervision Ltd to proceed further. It is only for the purposes of assessment as to the background of the applicant regarding suitability for purchasing a SKIDS Franchise. **No discussions will be entered into with applicants who decline to offer this basic information.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Post completed application to:

SKIDS Ltd  
PO Box 259-262  
GREENMOUNT, 2141  
Or Fax to (09) 5769902

<b>Office use only:</b>	
Date application received: _____	Date application processed: _____
Interview Date: _____	
Date Referees spoken to: 1. _____ 2. _____	
Notes: _____	
_____	
_____	
<b>Approved / Declined</b>	
Name: _____	Date: _____
Signature: _____	