



To accommodate our planning and your convenience, please indicate your preference of venue for the interview:

Province: [Click here to enter text.](#) Town/City: [Click here to enter text.](#)

APPLICANT INFORMATION			
Full Name and Surname: Click here to enter text.			
Identity Number: Click here to enter text.	Nationality: Click here to enter text.	Passport Number: Click here to enter text.	
Current address: Click here to enter text.			
City: Click here to enter text.	Province: Click here to enter text.	Contact Number: Click here to enter text.	
Email: Click here to enter text.	Spouse: Click here to enter text.	Spouse employment: Click here to enter text.	
Children: Click here to enter text.			
EMPLOYMENT INFORMATION			
Current employer: Click here to enter text.		Nature of business: Click here to enter text.	
Phone: Click here to enter text.		Position: Click here to enter text.	
Annual Income: Click here to enter text.		Period Worked: Click here to enter text.	
BUSINESS ASPIRATIONS AND INFORMATION			
Have you ever been convicted of a crime?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If YES, Please explain: Click here to enter text.			
Have you ever had a judgment against you?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If YES, when? Click here to enter text.		If YES, for how much? Click here to enter text.	
Have you been refused finance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, how long ago? Click here to enter text.
Do you currently, or have you ever owned your own business? Click here to enter text.			
If so, describe Click here to enter text.			
Have you ever failed in business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If So, Why? Click here to enter text.
Are you currently or have you ever been in franchising?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, please elaborate: Click here to enter text.			
Will you operate the business yourself?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If not, who will operate it? Click here to enter text.			
Do you have an existing "CC" / "PTY"? Click here to enter text.			
If accepted, how soon would you be able to operate the franchise? Click here to enter text.			
In which area do you prefer to open a 3@1 franchise? Click here to enter text.			



FINANCIAL INFORMATION			
Property owned: Click here to enter text.		Mortgage Bond: Click here to enter text.	
Public Company Shares: Click here to enter text.		Hire Purchase: Click here to enter text.	
Cash in hand: Click here to enter text.		Other Loans: Click here to enter text.	
Other: Click here to enter text.		Click here to enter text.	
Total Assets: Click here to enter text.		Total Liabilities: Click here to enter text.	
Net Worth: Click here to enter text.			
Would you require finance?	Click here to enter text.	If Yes, How much?	R Click here to enter text.
CREDIT REFERENCE/CHARACTER REFERENCE			
Kindly provide the details (Names and Phone Numbers) of at least three contactable personal or business references			
1: Click here to enter text.			
2: Click here to enter text.			
3: Click here to enter text.			

This application is not to be construed as a binding agreement for either party, but does give 3@1 Franchising (Pty) LTD the right to check the information provided within.

DATE: Click here to enter text.

PRINTED NAME: Click here to enter text.

Please feel free to send any further information you may consider relevant to this application to info@3at1.co.za

[Email application form to: info@3at1.co.za](mailto:info@3at1.co.za) or Fax 086 402 9368