



## Franchisee Application Form

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Please return to:

**Pusat Tuisyen Seri Puncak Sdn. Bhd.**

No. 20, Jalan USJ Sentral 3,  
USJ 1,  
Subang Jaya,  
47620 Selangor.

Tel : +603-8023 3331 (Hunting Line)  
Fax: +603-8023 9490

|                              |
|------------------------------|
| <i>For Official Use Only</i> |
| Date Received                |
| Area of Interest             |
| Remarks                      |

Thank you for your interest in the BM World program. Please complete this application form mail, e-mail or fax it back to us. Once we have received it, we will contact you for further discussion. All the information provided by you will be kept strictly confidential. Please note that the submission of this application form does not obligate you or us to purchase or sell a partnership respectively.

**BM World Franchise Disclosure Form**

**PART 1: FOR INDIVIDUAL OR JOINT APPLICANTS ONLY**

**Contact Information**

Name of Applicant : \_\_\_\_\_ (NRIC: \_\_\_\_\_)

Application of Type :      \_\_\_\_\_ Individual                      \_\_\_\_\_ Joint

Residential Address : \_\_\_\_\_

Country : \_\_\_\_\_ Postcode : \_\_\_\_\_

Tel : \_\_\_\_\_ (O) \_\_\_\_\_ (H) \_\_\_\_\_ (HP)

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

**Personal Particulars – Applicant**

|                |             |                |                      |
|----------------|-------------|----------------|----------------------|
| Date of Birth  | Race        | Gender         | Language Proficiency |
| Place of Birth | Nationality | Marital Status |                      |

| Highest Academic / Professional Qulifications/Year Obtained | Place of Study |
|---|----------------|
|   |                |
|   |                |
|   |                |

| Employment History |          |             |                  |
|--------------------|----------|-------------|------------------|
| Year               | Employer | Designation | Responsibilities |
|                    |          |             |                  |
|                    |          |             |                  |
|                    |          |             |                  |

|   |
|---|
| <p>Do you have any prior experience in running your own business? <span style="float: right;">Yes / No</span><br/> <i>If so, please provide details below, including nature of business, period of operation and reasons for termination.</i></p> |
|   |

**Personal Particulars – Applicant’s Partner**

Name of Applicant : \_\_\_\_\_ (NRIC: \_\_\_\_\_)

Relationship to Applicant : \_\_\_\_\_

Residential Address : \_\_\_\_\_

Country : \_\_\_\_\_ Postcode : \_\_\_\_\_

Tel : \_\_\_\_\_ (O) \_\_\_\_\_ (H) \_\_\_\_\_ (HP)

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

|                |             |                |                      |
|----------------|-------------|----------------|----------------------|
| Date of Birth  | Race        | Gender         | Language Proficiency |
| Place of Birth | Nationality | Marital Status |                      |

| Highest Academic / Professional Qulifications/Year Obtained | Place of Study |
|---|----------------|
|   |                |
|   |                |
|   |                |

| Employment History |          |             |                  |
|--------------------|----------|-------------|------------------|
| Year               | Employer | Designation | Responsibilities |
|                    |          |             |                  |
|                    |          |             |                  |
|                    |          |             |                  |

Do you have any prior experience in running your own business? Yes / No  
*If so, please provide details below, including nature of business, period of operation and reasons for termination.*

**PART II: FOR CORPORATE APPLICANTS ONLY****Contact Information**

Name of Company : \_\_\_\_\_  
Company Registration Number : \_\_\_\_\_  
Address : \_\_\_\_\_  
Country : \_\_\_\_\_ Postcode : \_\_\_\_\_  
Tel : \_\_\_\_\_(O) \_\_\_\_\_(O) \_\_\_\_\_(HP)  
Fax : \_\_\_\_\_ Email : \_\_\_\_\_

**Company Information**

Company Type: \_\_\_\_\_ Limited \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship  
Business Activity : \_\_\_\_\_  
Country of Incorporation / Registration : \_\_\_\_\_  
Year of Incorporation : \_\_\_\_\_ Annual Turnover : MYR \_\_\_\_\_  
Authorised Capital : MYR \_\_\_\_\_ Paid-Up Capital : MYR \_\_\_\_\_

| Top 3 Shareholders |             |          |
|--------------------|-------------|----------|
| Name               | Nationality | % Shares |
|                    |             |          |
|                    |             |          |
|                    |             |          |

Name of Main Subsidiary : \_\_\_\_\_

Country of Incorporation / Registration : \_\_\_\_\_

Year of Incorporation: \_\_\_\_\_ Annual Turnover : MYR \_\_\_\_\_

Authorised Capital : MYR \_\_\_\_\_ Paid-Up Capital : MYR \_\_\_\_\_

**Personal Particulars – Key Person (Person managing the partnership)**

Name of Key Person : \_\_\_\_\_ (NRIC: \_\_\_\_\_)

Designation : \_\_\_\_\_

Residential Address : \_\_\_\_\_

Country : \_\_\_\_\_ Postcode : \_\_\_\_\_

Tel : \_\_\_\_\_ (O) \_\_\_\_\_ (H) \_\_\_\_\_ (HP)

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

|                |             |                |                      |
|----------------|-------------|----------------|----------------------|
| Date of Birth  | Race        | Gender         | Language Proficiency |
| Place of Birth | Nationality | Marital Status |                      |

| Highest Academic / Professional Qualifications/Year Obtained | Place of Study |
|--|----------------|
|  |                |
|  |                |
|  |                |

| Employment History |          |             |                  |
|--------------------|----------|-------------|------------------|
| Year               | Employer | Designation | Responsibilities |
|                    |          |             |                  |
|                    |          |             |                  |
|                    |          |             |                  |

|   |
|---|
| <p>Do you have any prior experience in running your own business? <span style="float: right;">Yes / No</span><br/> <i>If so, please provide details below, including nature of business, period of operation and reasons for termination.</i></p> |
|   |

**Other Information**

1. Which statement best describes your experience working with children?
- I am a teacher/former teacher
  - I have worked as a tutor, counselor, etc
  - I am an active volunteer at a school
  - I have little experience but lots of interest

I have no experience but are committed to achieve

2. Which statement best describe your work preferences?

I enjoy multi-tasking and working on several projects at one time

I typically focus on one project at a time

I enjoy leading a project team

I enjoy working as a member of a project team

3. Which statement best describe your communication skills?

I enjoy public speaking and have significant writing experience

I enjoy speaking to small group or one-on-one

I prefer speaking one-on-one, but can communicate clearly

Communication skills are not strong

4. How involved do you see yourself as the owner of The BM World Centre?

Very involved, participating in the day-to-day operation and conducting classes

Involved in the day-to-day operations but hiring a designated instructor to conduct classes

Instructing The BM World classes while someone else manages the day-to-day operations

Investing in the venture while others run the centre operations and conduct classes

**Overall Market Research (to provide what is available by you)**

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1. Do you have any information/statistics of children in your preferred location? i.e age and education level parent income level?

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2. What kind of education program is available in your preferred location?

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3. Who is the major target market for education program in your preferred location?

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4. Who are the local/foreign competitors in your preferred location that provide education program that could compete with BM World Centre?

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5. How would you see BM World from those competitors?

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6. What other program do they provide at their centre?

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7. What is the average monthly fee for the education program in your preferred location/country? Does the fee include study materials?

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8. What marketing strategies that you would use to drive enrolment in your preferred location?

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9. Why do you choose your preferred location for education program?

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10. What is the average rental per square foot for education centre in your preferred location? Specify rental for low, medium and high end market.

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11. What is the hourly rate to hire a part time/temporary teacher on your preferred location?

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12. What is the average monthly salary for a full time tutor/teacher for your preferred location?

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**DECLARATION**

**I/We declare that all information provided herewith is true and accurate to the best of my/our knowledge. I/We understand that any misrepresentation or omission of information will affect the outcome of this application and subsequently render it null and void.**

**I/We also declare that I/we am/are not undischarged bankrupt(s) nor are there and bankruptcy proceedings against me/us. There are also no outstanding judgment or court cases pending against me/us. I/We hereby authorize Pusat Tuisyen Seri Puncak Sdn. Bhd. to make inquiries as necessary to determine the accuracy of the statements made above and determine my/our creditworthiness.**

**I/We agree that by submitting this application, I am giving BM World permission to verify the information submitted as part of an applicant qualification procedure**

\_\_\_\_\_  
Name & NRIC

\_\_\_\_\_  
Signature & Date

\_\_\_\_\_  
Company Name (if applicable)

\_\_\_\_\_  
Designation (if applicable)

\_\_\_\_\_  
Company Stamp (if applicable)

\_\_\_\_\_  
Registration Number (if applicable)

\_\_\_\_\_  
Name & NRIC

\_\_\_\_\_  
Signature & Date

\_\_\_\_\_  
Company Name (if applicable)

\_\_\_\_\_  
Designation (if applicable)

\_\_\_\_\_  
Company Stamp (if applicable)

\_\_\_\_\_  
Registration Number (if applicable)