



FOR OFFICE USE ONLY

SERIAL NO.

## COUNTRY FARM ORGANIC SHOP APPLICATION FORM

**THIS FORM CONSISTS OF TWO SECTIONS:**

### SECTION A: APPLICATION

PLEASE ATTACH PHOTOCOPIES OF N.R.I.C AND PASSPORT SIZE PHOTOGRAPHS FOR APPLICANT AND SPOUSE

### SECTION B: PROPOSED AREA

PLEASE ATTACH LOCATION MAP / PHOTOGRAPHS (FULL ADDRESS/ TOWN AREA & THE MAIN STREETS) OF YOUR PROPOSED AREA.

**NOTE:** ALL INFORMATION DISCLOSED IN THIS FORM WILL BE TREATED WITH STRICT CONFIDENCE.

APPLICANT'S  
PHOTO

SPOUSE'S  
PHOTO

## SECTION A

### 1. PERSONAL DETAILS

	APPLICANT	SPOUSE
FULL NAME (AS PER NRIC)		
NEW N.R.I.C NO		
OLD N.R.I.C NO.		
eCOSWAY MEMBERSHIP NO.	I.D Name :	I.D Name :
	I.D Num:	I.D Num:
DATE OF BIRTH		
PLACE OF BIRTH		
AGE		
NATIONALITY		
RACE		
RELIGION		
HANDPHONE NO.		
HOUSE TEL. NO.		
OFFICE TEL. NO.		
EMAIL ADDRESS		
SEX	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
MARITAL STATUS	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED	<input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED

RESIDENCE ADDRESS:	
MAILING ADDRESS:	

## 2. EDUCATION LEVEL

### APPLICANT

NAME OF SCHOOL / COLLEGE / UNIVERSITY	YEAR		QUALIFICATION ACHIEVED
	FROM	TO	

### SPOUSE

NAME OF SCHOOL / COLLEGE / UNIVERSITY	YEAR		QUALIFICATION ACHIEVED
	FROM	TO	

## 3. PROFICIENCY (Circle accordingly. 5 – Excellent, 4 - Very good, 3 – Good, 2- Fair, 1 - Poor)

### APPLICANT

	SPOKEN						WRITTEN					
1. ENGLISH	5	4	3	2	1	N/A	5	4	3	2	1	N/A
2. BAHASA MELAYU	5	4	3	2	1	N/A	5	4	3	2	1	N/A
3. MANDARIN	5	4	3	2	1	N/A	5	4	3	2	1	N/A
4. TAMIL	5	4	3	2	1	N/A	5	4	3	2	1	N/A
5. OTHERS (please state)												
_____	5	4	3	2	1	N/A	5	4	3	2	1	N/A

	SKILL					
1. COMPUTER LITERACY LEVEL	5	4	3	2	1	N/A

## SPOUSE

	<u>SPOKEN</u>						<u>WRITTEN</u>					
1. ENGLISH	5	4	3	2	1	N/A	5	4	3	2	1	N/A
2. BAHASA MELAYU	5	4	3	2	1	N/A	5	4	3	2	1	N/A
3. MANDARIN	5	4	3	2	1	N/A	5	4	3	2	1	N/A
4. TAMIL	5	4	3	2	1	N/A	5	4	3	2	1	N/A
5. OTHERS (please state)												
_____	5	4	3	2	1	N/A	5	4	3	2	1	N/A

	<u>SKILL</u>					
1. COMPUTER LITERACY LEVEL	5	4	3	2	1	N/A

## 4. APPLICANT'S EMPLOYMENT DETAILS

DETAILS	PRESENT	PAST (1)	PAST (2)
NAME OF COMPANY			
ADDRESS			
NATURE OF BUSINESS			
POSITION HELD			
MONTHLY INCOME (RM)			
YEARS EMPLOYED			

## 5. SPOUSE CURRENT'S EMPLOYMENT DETAILS

NAME OF COMPANY	:	_____			
ADDRESS	:	_____ _____			
NATURE OF BUSINESS	:	_____	POSITION HELD	:	_____
MONTHLY INCOME	:	RM _____	YEARS EMPLOYED	:	_____

## 6. NO. OF CHILDREN

	<u>NAME</u>	<u>AGE</u>	<u>SEX</u>	<u>IC NO</u> (IF APPLICABLE)
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

## 7. OTHER INFORMATION/ DETAILS

1. DO YOU HAVE MEMBERSHIP IN ANY OTHER DIRECT-SELLING COMPANY AND HIGHEST POSITION HELD?
- ☐ YES (PLEASE STATE) \_\_\_\_\_ ☐ NO
2. HAVE YOU BEEN CHARGED OR CONVICTED FOR THE VIOLATION OF ANY LAW APART FROM MINOR TRAFFIC OFFENCES?
- ☐ YES (PLEASE STATE) \_\_\_\_\_ ☐ NO
3. HAVE YOU BEEN ADJUDGED AS A BANKRUPT/ BANK SUMMONS IN THE PAST?
- ☐ YES (PLEASE STATE) \_\_\_\_\_ ☐ NO
4. DO YOU HAVE ANY RELATIVES OR FAMILIES WHO ARE/ WERE ECOSWAY/COSWAY STORE OPERATOR/ STOCKIST?
- ☐ YES (PLEASE PROVIDE NAME(S) AND CODE) ) \_\_\_\_\_ ☐ NO
5. EARLIEST DATE ABLE TO START OPERATING \_\_\_\_\_

## 8. REFEREES *(REFEREES PROVIDED SHOULD NOT BE APPLICANT'S RELATIVES OR PRESENT EMPLOYER)*

DETAILS	REFEREE 1	REFEREE 2
FULL NAME (AS PER NRIC)		
NEW N.R.I.C.		
OLD N.R.I.C		
eCOSWAY MEMBERSHIP NO.		
ADDRESS		
HOUSE TELEPHONE NO.		
OFFICE TELEPHONE NO.		
HANDPHONE NO.		
RELATIONSHIP		

## SECTION B

### 1. PROPOSED AREA

NO	PROPOSED AREA	NO. OF <u>OTHER</u> ORGANIC STORES AROUND THE AREA
1.		
2.		
3.		
4.		
5.		
6.		

(NOTE: IF YOU WOULD LIKE TO PROPOSE ADDITIONAL AREA(S), KINDLY PHOTOCOPY SECTION B AND SUBMIT TOGETHER.)

## **2. STATE YOUR STRENGTHS TO SUPPORT YOUR ABILITY TO OPERATE AN ORGANIC STORE**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

### **DECLARATION**

I HEREBY SOLEMNLY DECLARE THAT I HAVE FULLY READ AND UNDERSTOOD THE CRITERIA FOR COUNTRY FARM ORGANIC STORE APPLICATION AND THAT THE INFORMATION DISCLOSED IN THIS APPLICATION IS TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND UNDERSTANDING. I UNDERSTAND AND ACCEPT THAT ANY FALSE OR INCOMPLETE STATEMENT OR WITHHOLDING OF ANY RELEVANT INFORMATION MAY PROVIDE GROUNDS FOR THE WITHDRAWAL OF ANY OFFER OR APPOINTMENT OR FOR ITS IMMEDIATE CANCELLATION IF THE APPOINTMENT HAS BEEN ACCEPTED. THE COMPANY RESERVES THE EXCLUSIVE RIGHT TO REJECT ANY INCOMPLETE APPLICATION FORM.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE