



## Male Concept Barbers Franchise Application Form

Private & Confidential

- We have a great deal of experience in providing Male Grooming Services to our clients.
- Please provide as much information as possible in order for us to ascertain whether our business will suit your requirements.
- All information is provided in the strictest confidence.

### APPLICANT'S DETAILS

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_  
Years at this address \_\_\_\_\_ Owner/Tenant/With Parents/Other? \_\_\_\_\_  
Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Mobile) \_\_\_\_\_  
E.Mail \_\_\_\_\_ Marital Status \_\_\_\_\_  
Number of Children \_\_\_\_\_ Names & Ages \_\_\_\_\_

### EMPLOYMENT HISTORY

(Please outline your employment history, starting with your current position)

Dates	Employer Name & Address	Position	Salary

### EDUCATION & QUALIFICATIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### HEALTH

(Please give details of any major illnesses in the past five years)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If your partner or spouse will work with you in the business, please complete this section

### SPOUSE/PARTNER'S DETAILS (if applicable)

NB: Where details are the same as the applicant's, please write 'same'

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_  
Years at this address \_\_\_\_\_ Owner/Tenant/With Parents/Other? \_\_\_\_\_  
Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Mobile) \_\_\_\_\_  
E.Mail \_\_\_\_\_ Marital Status \_\_\_\_\_  
Number of Children \_\_\_\_\_ Names & Ages \_\_\_\_\_

### EMPLOYMENT HISTORY

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Dates	Employer Name & Address	Position	Salary

### EDUCATION & QUALIFICATIONS

male concept

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### HEALTH

(Please give details of any major illnesses in the past five years)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### WORKING RELATIONSHIP

(Would your spouse/partner be involved in the franchise? If so, in what capacity?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**OTHER INFORMATION**

Have you ever been declared bankrupt? \_\_\_\_\_

Please provide details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever had a County Court Judgement entered against you? \_\_\_\_\_

Please provide details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have a full, clean UK driving license? \_\_\_\_\_ If not number of penalty points \_\_\_\_\_

Please use the space below to provide any further information that you think is relevant to your application for a Male Concept franchise.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES** (These will only be taken up if proceeding)

Personal (NOT Relatives) \_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_

Bank \_\_\_\_\_

\_\_\_\_\_

Accountant \_\_\_\_\_

\_\_\_\_\_

Solicitor \_\_\_\_\_

\_\_\_\_\_