

ENERGCARE INDEPENDENT DISTRIBUTOR APPLICATION FORM



1. Personal Details

Full name		Nationality	
Email		Gender (M/F)	
ID		Cell Phone	
Address			
		Province	
Do you have a valid driver's license? (Yes/No)			
Do you own a working vehicle? (Yes/No)			

2. Language Ability

Please list all the languages you are familiar with and indicate with an 'x' the relevant number for your speaking and writing abilities. (Scale: 1 = Basic, 2 = Average, 3 = Very Good).

Language	Speaking Ability			Writing Ability		
	1	2	3	1	2	3
English						

3. Sales Experience

Have you ever had any previous sales roles and positions? (Yes/No)	
If yes, please give additional details about the marketing and sales roles you have had, what you were asked to sell and how you attempted to make sales?	

Please explain your reasons for wanting to market and sell EnerGcare products?

Briefly outline your plan for how you intend to market and sell EnerGcare products in and around your community?

Why do you believe you stand out and possess the qualities needed to become a highly successful EnerGcare Independent Distributor?

Thank you for applying! Please submit the completed form together with a photocopy of your green ID book via email to info@energcare.co.za or by fax to 086 619 7872. Successful candidates will be contacted by EnerGcare management and invited to an interview.