



APPLICATION FORM

for Prashnig Style Solutions (PSS) Partner Program

1. Company/Organisation Particulars

Trading name:

Postal Address:

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Physical Address:

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Tel: Fax:

Mobile: E-mail:

Website:

Key Personnel:

Business Owner:

Managing Director/CEO:

Key contact for PSS Partner Program:

Phone Direct Line/Extension:

2. Company Profile

How long has this company been in business? Since

If company, date of incorporation:



Is your business a registered limited liability company? YES NO

Company registration number:

If business is not a registered company, give full name of owner(s) and/or partner(s):

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Do you employ/contract trainers or facilitators? YES NO

What is your company's core business?

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Products & services currently offered:

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.....

What other software licenses do you currently hold - how long have you held them?

.....
.....

3. Sales & Marketing Information

Do you sell directly to: Education institutions? YES NO

 Business enterprises? YES NO

 Individual customers? YES NO

Do you sell via representatives/sales people? YES NO

Do you sell via partner organisations ? YES NO



4. Partner Application

PSS Product categories you are interested in (please tick the box):

A. Education: LSA-Mini Junior Senior Adult & TSA-Ed

B. Business: WSA & TSA-Corp

C. Other:

Why do you want to add these products to your current offerings?

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.....

Which Country / Region would you request as your territory?

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Tick Preferences for type of PSS Partnership (as per Partner Program description):

Distributor

VAR – Value Add Reseller

Reseller

Influencer

Translator

5. Other Information

Please add any other information you consider vital to support your Application for participating in The Prashnig Style Solutions (PSS) Partner Program here:

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6. Disclaimer

This Partner Application form must be completed as a pre-requisite for releasing the Partner Agreement and any confidential information to a prospective Partner.

Prospective Partners should be aware of the following:

1. This application and any other information will be used to evaluate whether to invite the prospective Partner into the PSS Partner Program and will be held in strictest confidence.
2. The acceptance or review of this application imposes absolutely no obligation on Creative Learning Systems (CLS) to approve the request for joining the PSS Partner Program.
3. There is no financial obligation associated with the signing and submitting of this application form for the prospective Partner.
4. Additional information may be requested upon evaluation of this application and all fees and costs incurred for the purposes of making a submission are the sole responsibility of the prospective Partner.
5. No legally binding contract will exist until a prospective Partner has received from CLS a fully executed Partner contract. All oral or written statements made prior to the due execution of the formal contract are merely expressions of interest and not legally binding.
6. In the event that information provided in this application is discovered to be misleading, false, or incomplete, any membership in the PSS Partner Program will be subject to immediate termination.

7. Declaration

I have read, understood and accepted the presented information, and certify that all information provided including the additional information to this application is true and accurate.

I am authorised to make applications of this nature on my company's behalf.

Name:

Company:

Position:

Signature: Date:

