



**INNOVATIONS THROUGH INFORMATION**

**FRANCHISEE ENQUIRY FORM**

<b>Personal Details</b>	
Contact Person	
Designation	
Address	
City	
State	
Country	
PIN	
Phone (Include Country/City code)	
Mobile	
Official Email id	
<b>Company Details</b>	
Company Name	
Nature Of Business	
Company Registration Number	
Registered Address	
Type of Company	
Date of Incorporation	
Annual Turnover (In USD)	
<b>Infrastructure Details</b>	
Address	
City	
State	
Country	
PIN	
Total Space	
Total Number of PC	
Training Room Numbers	
Total Number Of Employees	
<b>Additional Details</b>	
Why are you interested in partnering with Mobile Technology Academy, NESPL (Not more than 50 words)	

**NOTE 1 :- Please send all the information along with corporate presentation.**

**NOTE 2 :- As per our company, we don't give franchisee to individuals.**

I hereby certify that the information given in the form is complete and accurate. I understand and agree that misrepresentation or omission of facts will justify the denial of franchisee or cancellation of franchisee

Date

Signature & Company Seal: