

CONFIDENTIAL

*This application does not obligate
either party in any manner*

I hereby certify that the information I have written in this application form is my true personal and financial conditions as of _____, 201__.

I fully understand that UNO International Corporation or its authorized representatives may contact my present/past employers, any law enforcement agency or person who has personal knowledge of my character, work experience, or criminal records, to ascertain my credibility as UNO Business Center applicant. **Let it be known that I fully agree to this procedure and hereby allows the release of related information only to UNO International Corporation or its authorized representative.**

I further acknowledge that the results in background and/or credit history may determine the approval or disapproval of my business/mobile center application.

signature over printed name
(UBC applicant)

signature over printed name
(spouse, if applicable)

PART I - PERSONAL INFORMATION

DATE OF APPLICATION :		REF./CODE :		
last name	first name	middle name	date of birth	age
residence no/s.	cell phone no/s.	office/business no/s.	fax no/s.	
email address/es:		T.I.N.	SSS No.	
complete address (<i>residence</i>)				
provincial address			citizenship	marital status
spouse's name (<i>last name</i> <i>first name</i> <i>middle name</i>)			no. of children	
<i>names & ages of children:</i>				

<ul style="list-style-type: none"> • Have you or your spouse, been convicted of any crime? () Yes () No • Has any judgment ever been entered against you or your company or your employer were one of the litigants? () Yes () No • Are you involved in pending litigations? If yes, explain. () Yes () No 				
Have you or your spouse (<i>if any</i>), ever declared personal bankruptcy? If yes, briefly explain. () Yes () No				

**PART II - EDUCATION**

Level of education completed <input type="checkbox"/> <i>postgraduate</i> <input type="checkbox"/> <i>graduate</i> <input type="checkbox"/> <i>vocational</i> <input type="checkbox"/> <i>certificate</i> <input type="checkbox"/> <i>others(pls. specify)</i> _____			
Do you have any training in sales, management or retailing? <input type="checkbox"/> Yes <input type="checkbox"/> None			
If yes, briefly describe: _____			
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please proceed to Part III. If no, skip Part III & proceed to Part IV.</i>			

PART III – EMPLOYMENT HISTORY *(start from the most recent)*

Name of company	Position	Dates employed
Company contact number/s:	Address	
Briefly describe your duties & responsibilities, number of employees supervised, etc.		
Name of company	Position	Dates employed
Company contact number/s:	Address	
Briefly describe your duties & responsibilities, number of employees supervised, etc.		
Name of company	Position	Dates employed
Company contact number/s:	Address	
Briefly describe your duties & responsibilities, number of employees supervised, etc.		
Name of company	Position	Dates employed
Company contact number/s:	Address	
Briefly describe your duties & responsibilities, number of employees supervised, etc.		
Name of company	Position	Dates employed
Company contact number/s:	Address	
Briefly describe your duties & responsibilities, number of employees supervised, etc.		
DO YOU HAVE ANY BUSINESS EXPERIENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please proceed in answering Part IV. If no, proceed to Part V.		

PART IV – BUSINESS EXPERIENCE *(start from the most recent)*

Is this your first time to put up a business? If no, please state the business/es you have invested in or currently engaged in. () Yes () No

Dates <i>(from – to)</i>	Company	Contact Number	Term of contract <i>(if any)</i>	Products / Services Offered

PART V – MANAGEMENT GOALS

Do you plan to devote full time to this venture? () Yes () No	
If no, who will manage the business?	
Do you have a preferred/proposed location? () Yes () No	
If yes, where?	If none, what are the areas of interest to you? 1. _____ 2. _____ 3. _____
Do you plan to or have equity partners? () Yes () No	

If yes, pls. complete the following:

Name of Partner No. 1	relationship to UBC applicant
Address	Contact Nos.
Name of Partner No. 2	relationship to UBC applicant
Address	Contact Nos.
Name of Partner No. 3	relationship to UBC applicant
Address	Contact Nos.

PART VI - PERSONAL FINANCIAL STATEMENT

Income Statement for 12 months period ending _____, 201__

INCOME	
Salary, Wages, Bonuses, Commissions	Php
Dividends, Interest	
<i>Other Income</i> – Specify Source, e.g. Business Profits (Self Employed), Trust, Spouse, Etc.	
TOTAL	Php

Please provide details on the following Asset Verification Schedules. Answer the questions using NO or NONE where necessary. Attach additional sheet/s if needed.

ASSETS	
Cash on hand and in banks	Php
Vested Profit Sharing	
Securities, Bonds, etc.	
Notes, Accounts and Mortgages Receivable	
Real Estate-Current Market Value	
Net Value of business Interest	
Other-Automobiles and Other Personal Property, etc.	
TOTAL ASSETS	

LIABILITIES	
Loans/Notes/Account Payables	
Real Estate Mortgages	
Other Debts or obligations	
TOTAL LIABILITIES	
NET WORTH	Php
TOTAL LIABILITIES AND NET WORTH	Php

PART VII - PERSONAL & BUSINESS REFERENCES (other than employers or relatives)**PERSONAL REFERENCES**

<i>Full name</i>	<i>Address</i>	<i>Contact Nos.</i>	<i>Occupation</i>	<i>known since</i>

BUSINESS REFERENCES

<i>Full name</i>	<i>Address</i>	<i>Contact Nos.</i>	<i>Occupation</i>	<i>known since</i>

BANK REFERENCES

<i>Name of bank</i>	<i>branch</i>	<i>Contact person</i>

CREDIT CARD REFERENCES

<i>Card company</i>	<i>Type of card</i>	<i>Credit limit</i>

I/we are authorizing UNO International Corporation, to contact the companies/organizations/persons we have listed above, if necessary, for background/credit investigation.

PART VIII - MISCELLANEOUS INFORMATION

What are your hobbies, community activities, special interests?
Are you related by blood or marriage to an officer of UNO International Corporation or UBC owner? () YES, specify please () NO
Are you or your employer, currently provides products, goods or services to UNO International Corporation? If yes, please briefly explain.
If your proposed site is disapproved, would you be willing to establish your UBC in one of the declared "open areas" at of the time of your application? () YES () NO
Where did you learn about UNO International Corporation? <input type="checkbox"/> AD <input type="checkbox"/> PR <input type="checkbox"/> Trade Shows <input type="checkbox"/> Referral <input type="checkbox"/> Others:
What motivates you to become an UNO Business Center owner?
Amount of capital available for this business?
If you are awarded an UNO Business center, when will you be available for training?



What qualities do you possess that could ensure the success of the business center?

Other plans/Remarks or Suggestions:

(printed name & signature)
UBC Applicant

_____, 201_____
(date accomplished)

THIS IS NOT A CONTRACT AND SUPPLYING OR COMPLETING THIS FORM INCURS NO OBLIGATION ON EITHER PARTY.