



Counseling Center Enrollment Form

Unit Enrollment State Enrollment District Master Enrollment

As discussed, we are please to extend our Counseling Center to you, but before we go ahead you need to fill in the below details and ascertain your interest.

The below details once filled will help you be one of us and we are happy to extend our warm hospitality to you.

Before filling details let's look at what we offer:-

Greetings from EnviroSkills Academy

What We Offer?

We provide a range of support services starting from assistance for marketing support till an extent with a proper training support to the team appointed by you. We will provide curriculum support & will also support in the faculty recruitment which continue for the entire tenure of the agreement and continues even after renewal of the agreement. Present running programs are given below

Earn While You Learn – Goa

Earn While You Learn – Malaysia

Earn While You Learn – Singapore

Earn While You Learn – Australia

THIS IS JUST A BEGINNING TO CONQUER THE WORLD.....

Investment Details

As for the profit sharing, we charge a **License Fee** at the time of signing of the agreement which is Rs. 50,000/- + GST

Requirement Details:-

Center Space – 300 sq. ft.

Important – While you are in this Counseling Center contract with ESA, you will not be eligible to get in to a contract with any other Education provider for any similar or equal course.

Let's Fill the Form Now:-

ENVIROSKILLS ACADEMY PVT LTD

Corporate Office- 2nd Floor, Shanta Building, 18june RD.ST, Inez, Panjim, Goa 403001



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FRANCHISEE PARTICULARS		
Name of Franchisee/Company: _____		Management Contact (Name): _____
Company Registration Number: _____		Identity/Passport No.: _____
Company Address: _____		Email Address: _____
Website: _____		Office Number: _____
		Mobile Number: _____
		Fax Number: _____
Do provide the following information/document: Registered Business Entity of the Franchisee /company References, Recognition &/or Track Records (with evidence where applicable) Management Contact (Photo-copy of Passport)		
Franchisee Check list		
1.	a) Have proper Business Outfits (Do attach some office photo)	YES <input type="checkbox"/> NO <input type="checkbox"/>
	c) Your business is free of from any current or pending disputes in court?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	d) Any event that may lead to a change of its suitability	YES <input type="checkbox"/> NO <input type="checkbox"/>
	f) Have a strong belief in education, and a desire to help others by giving them the opportunity for a good education.	YES <input type="checkbox"/> NO <input type="checkbox"/>
	g) In the next 12 months, how many students would you expect to recruit for our College? Note: we adopt performance-based Tiered commission system.	Recruitment Targets: ____/Year
2.	Marketing:	
	a) Marketing plan	YES <input type="checkbox"/> NO <input type="checkbox"/>
	b) Are Our Courses suitable for your market?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	c) Is Recruitment target achievable?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	More Elaboration on the above:	
	Communication:	
	a) To keep School updated of its activities	YES <input type="checkbox"/> NO <input type="checkbox"/>

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Regional Office – 20, 1st Floor Shyam Plaza, Vikas Nagar Ring Road, Lucknow, UP. 226001

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3.	b) Franchisee follow strictly the approval procedures for vetting marketing materials and methods	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	c) To undertake the recruitment of students for all the programs run by ESA. The Franchisee will forward to ESA the completed Application Forms and duly verified copies of supporting documents with the words “Original Seen” signed/stamped thereon as evidence of the Agent’s referral.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	d) To fairly and accurately represent ESA at all times and to acknowledge that false representation of the relationship between the Franchisee and ESA , or misrepresentation of ESA’s fees, course content, facilities, aims and corporate objectives shall result in immediate termination of this contract by ESA.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	f) Undertake to follow Franchisee code of conduct	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If “No”, provide details:			

FRANCHISEE’S DECLARATION*

1. I confirm that the details given above are true
2. I understand that my application is subject to the final approval and confirmation of the management of the College.
3. I understand that as an admission Franchisee for the college have to ensure that I give accurate information of the institute and the courses conducted.
4. I understand that my duties and authority are also subject to the terms and conditions in the Franchisee contract and code of conduct, hereby agree to be bound by the terms and conditions laid down by the College and in the Franchisee Contract.
5. I have no objection for the College to indicate my Company on it’s website once agreement is signed and permission to ESA to conduct any information pertaining to my company.

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Name/Signature and Co. Stamp, if any	Date
RECOMMENDED BY MANAGER	APPROVED BY MANAGING DIRECTOR
<hr/>	<hr/>
Name/Date:	Name/Date:

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