Ref No………….. Date……………..

To

Xavier educational group

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sub: - Franchise Proposal

Dear,

Sir/Mam.

It has come to my attention that there is not a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the Location of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am proposing that we open a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in this location. I have researched the area data indicates that it would be a prosperous investment to open a franchise in this location.

Please contact me if you are interested in this proposal.

Member Signature

1. Sincerely

2.

3. Address

4.

Mobile No

**XAVIER EDUCATIONAL GROUP**

**A Unit of Xavier Educational Trust of India**

**Govt. of India Regd. No.- 41081910721, ISO Certified – 9001:2015**

**H.O- A/20 EXT Ashyana Up Side Road Sikandra, Agra,UP-282007**

**At- Chakeisihani, Po-Rasulgarh, Bhubaneswar, Dist-Khurda, Odisha-751010**

**BRANCH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CODE \_\_\_\_\_\_\_\_\_\_\_ MO. NO.\_\_\_\_\_\_\_\_\_\_\_**

**FRANCHISEE SHOOL & OFFICE BIO-DATA**

1. **Applied for Franchisee : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Affix Here Passport Size Photograph do not staple

1. **Name of the School : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Name (Capital Letters) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Father’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Mother’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
5. **Mobile No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
6. **Aadhaar No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
7. **Permanent Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Present Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Nationality : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Religion : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Date of Birth : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Marital Status : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
5. **Category : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
6. **Location Branch Office/ School Address :**

|  |  |
| --- | --- |
| **LOCATION – I (ADDRESS)** | **LOCATION – II (ADDRESS)** |
|  |  |

1. **Gender : Male Female**
2. **Details of Payment : Draft Bank Chalan**

**Cash Debit/Credit Card**

**Draft/Cash/Debit/Credit Card/Bank Chalan No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of the Branch / School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**Payment only by Demand Draft for XAVIER EDUCATIONAL TRUST OF INDIA payable at Bhubaneswar.**

**Declaration**

**I hereby declare that the above written particulars are true to the best of my knowledge & belief and I hold responsible myself for any irregularities if found.**

**Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature**

**N.B.: If you are not selected money will be not refundable.**