



Kskin Singapore

Expression of Interest Franchise Application Form

Thank you for your interest in being a Kskin Franchise Partner.

We are looking for franchisees with the following profile:

Nationality:

Singaporean or Singapore PR

Personality:

Positive attitude and management ability
Strong commitment to business & drive to succeed
Excellent customer-service orientation

If you meet this profile, we invite you to complete this application form and return it to us as soon as possible. All information provided will be treated with the strictest confidence.

Please complete and return this form to:

Franchise Manager, Kskin Pte Ltd

Email: hello@kskinfacial.com

PERSONAL PARTICULARS

Name: *Mr/ Mrs/ Ms _____

Address: _____

_____ S ()

Contact Number: _____ Email: _____

Nationality: _____ Race: _____

Age: _____ Marital Status: _____

Highest Academic / Professional Qualifications attained: _____

Do you intend to have investment partners? If so, please kindly provide their details:

(1) Name of Partner: *Mr/ Mrs/ Ms _____

Relationship to applicant : _____

Contact Number: _____ Email: _____

Nationality: _____ Race: _____

Age: _____ Marital Status: _____

Highest Academic / Professional Qualifications attained: _____

(2) Name of Partner: *Mr/ Mrs/ Ms _____

Relationship to applicant : _____

Contact Number: _____ Email: _____

Nationality: _____ Race: _____

Age: _____ Marital Status: _____

Highest Academic / Professional Qualifications attained: _____

Your Employment Record:

Period	Name of Employer	Position

If currently Self-Employed/running a business, please specify nature of business:

FRANCHISE BUSINESS

(1) Why are you interested in Kskin franchise?

(2) Why do you think you will make an ideal Kskin franchisee?

(3) Do you intend to involve your family members in operating Kskin?

PREVIOUS EXPERIENCE

(1) Do you have any previous experience in retail? * Yes / No

If YES, please kindly provide details:

(2) Do you have any previous experience in operating a franchise business? * Yes / No

If YES, please kindly provide details:

FINANCIAL INFORMATION

(1) How much money do you have to invest? (Please tick one)

- SGD\$200,000 – SGD\$300,000
- SGD\$301,000 – SGD\$400,000
- More than SGD\$400,000

(2) Where will your investment monies come from? (You select more than one)

- Personal Savings
- External Investors
- Bank Loan
- Others (please specify): _____

(3) What is your Gross Income declared in the latest Year of assessment?

SGD \$ _____

(4) What is your annual sales turnover of your own business? (*For Self-Employed/Business person*)

- Less than SGD\$250,000
- SGD\$250,001 – SGD\$500,000
- SGD\$500,001 – SGD\$1,000,000
- Above SGD\$1,000,000

-----**DECLARATION**-----

Please answer all the following questions (Please tick):

- (1) Have you or the directors/ partners ever been convicted of a criminal offence by a court of law, in Singapore or overseas? Yes / No
- (2) Have you or the directors ever been involved in any civil litigation in the past 5 years? Yes / No
- (3) Have you ever been declared bankrupt or has any company you previously ran become insolvent? Yes / No

If you have replied yes to any question above, please provide details:

By signing below, the applicant certifies that all information provided herewith is true and accurate to the best of his knowledge. If the applicant is found to have wilfully provided misleading information, his application for the franchise and its subsequent award, if any, may be deemed null and void.

Personal Data Protection Consent (PDPA)

By submitting this application, I agree that KC Group Pte Ltd. and its related companies may collect, use, and share my personal data to review and process my franchise application, contact me about the franchise opportunity, prepare related documents, and meet legal or regulatory requirements, in accordance with Singapore's Personal Data Protection Act (PDPA). I understand that my information may be shared on a need-to-know basis with relevant staff, advisers, business partners, or service providers, whether in Singapore or overseas, and may be kept for as long as necessary for these purposes.

Name: _____ NRIC: _____

Signature: _____ Date: _____

~ Thank you for your interest in Kskin franchise ~