

**Franchisee Initial Information Form**

The first step when considering an Early Learners’ Nursery School (ELNS) franchise is to complete this form so that we can contact you and book you on to the next Franchise Introductory Session.

Please email it to franchise@elns.co.uk or post it to:

LE Associates (UK) Ltd, 161 Humberstone Road, Leicester, LE5 3AP

with your CV (or summary of your background if you do not have a CV). just call 03301 239239 and we will take the information by phone and book you in at the same time.

We look forward to meeting you!

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| **Your Information** | | | |
| Your full name: |  | City or area of interest: |  |
| Date of birth: |  | Date of form: |  |
| Home address: |  | | |
| Home Tel number: |  | Mobile number: |  |
| Email address: |  | Best time to contact: |  |

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| --- |
| **Outline Information** |
| Please describe your current situation (e.g. employed, self-employed, not currently working): |
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| When are you potentially looking to take a franchise (eg immediately, within 3 months, 6 months)? |
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| What other franchises are you considering, if any? |
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| Where did you hear about our franchise (eg our website, advert (please specify), referral)? |
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**Have you: 1. Attached your CV / background? 2. Completed this form?**

**By sending this form to us you acknowledge and accept the following confidentiality obligation:**

*I acknowledge that while considering a franchise with ELNS, I will receive confidential information. I undertake not to disclose or use any of that information without prior written consent from ELNS.*