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## **FORM**

Distribution	Center	
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ranninterested to join as (	I am interested	to join	as ( ,	/
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Direct sales representative	Training officer	Distribution	Distribution system		
		Wholesaler	Distributor	Stockist	Super stockist

photo		photo	

Prospect Name (Mr/Ms)				
Address	Locality			
	city / village	Distt	Sta	ate
	Pin no Land mark	<u> </u>		
Personal Info	Age Date of birth	Blood grou	р	Married (Y/N)
Communication	Mobile No	Email id		
Parents / Husband Name				
Nominee	Name		Relation	Age
Preferred working area				
Bank details	Name of Bank		IFSC code	
	A/c No		Branch address	
Mandatory Attachments	a. 2 photos b. ID a ID & Address type	nd Address proof No	c. Cancell	ed cheque / passbook
Referred by	Name			
	If associated with company –			
	Position	ld no		

Important :- ID number will not be issued without attachments

Prospect signature	Company official (Checked and verified by)
Date	Name
Place	Login date
	Id no issued – VMDS /