

Application Form for Sales Agents or Store Retailers of Alkmi

Personal Information:

Full Name: _____

Address: _____

Phone: _____

Email: _____

ID/ Passport number (sales agents): _____

Store registration number: _____

Store location : _____

Social Media Handles(s) of agent or Store: _____

Are you interested in becoming a Sales Agent or Store Retailer? (circle one)

Previous Experience:

Please list any previous experience you have had in sales or retail:

- Company: _____ Position: _____
- Company: _____ Position: _____
- Company: _____ Position: _____

Do you have any experience in the CBD industry? (circle one) Yes / No

If yes, please explain: _____

Marketing and Sales:

How would you promote and sell Alkmi products? (please specify)

- In-Person Sales
- Online Sales
- B2B Sales
- Other (please specify): _____

What social media platforms do you use for marketing? (Sales Agents please specify)

- Facebook
- Instagram
- Twitter
- LinkedIn
- Other (please specify): _____

What type of consumer demographics are you targeting for Alkmi products?

- Age Range: _____
- Gender: _____
- Interests: _____
- Location: _____

Average store visits a month : _____

Why are you interested in selling Alkmi products?

- Brand Values
- Quality of Product
- Profit Margin
- Other (please specify): _____

Please email this application with your CV(sales agents) to info@alkmi.co.za

Certification:

I certify that all the information I have provided on this application is true and accurate.

Signature: _____

Date: _____