

ARIZAN INSTITUTE Pvt. Ltd.

Everything is Possible..!



Franchisee Form

Personal Details

Name:			
Email :		Hello:	
Date of Birth:	Occup	oation:	
Address:			
Dist:	State:		Pin:
	Busines	s Details	
Institute Type:			
Computer Institute (Software Hardware Spoken English Cours	Designing es)(Beautician Fashion		KIDS School Project Play Group Nursery LKG UKG Classes
Investment Capital:			
Computer Knowledge:	Yes	☐ No	
If Teaching Experience:	Yes	☐ No	
If Existing Centre:	Yes	□ No	
How did you come to know	about us:		
☐ Friend ☐ Pape	er Advertisement	☐ Internet Sea	rch Hoardings
	Decla	ration	
I hereby declare that all informa	tion submitted h	ere, are true to the b	est of my knowledge.
Date:		Signa	ture of Applicant