



*Consultant pack*

*Exciting  
Opportunities*

  
**REGAL**  
Fish Supplies Ltd



*Join Our Team*

## Regal Fish Supplies Ltd

Ardent Road, Falkland Way  
Barton Upon Humber  
North Lincolnshire  
DN18 5RN

Telephone 08453 893 973

Fax 01652 634 790

[www.regalfish.co.uk](http://www.regalfish.co.uk)

## Independent Consultant

OTE is a generous commission package that will net you in excess of £25,000 - £35,000 per annum...our experienced consultants earn a lot more!



### So...

*Can you sell ice to the Eskimos?*

*Are you the life and soul with the ability to sell the sole?*

*Could you be our next Catch Of The Day?*

*If you have previously worked in a sales environment, would feel at ease dealing with prospective customers on their doorstep and have the ability to establish relationships within seconds, then you could be just what we are looking for.*

**Persuasive and proactive, you will be capable of thinking on your feet, possess an ability to build instant rapport and be willing to cultivate the knowledge required to successfully promote our unique service. Your income will be a generous commission on products sold (that's your job) & delivered (our drivers will do the delivery and collect the payment); realistic on target earnings of £500 - £700 OTE paid weekly, though our top consultants earn a lot, lot more!. This is just like having your own business, with none of the start-up costs and with great earning potential from the beginning.**

In return for your hard work & endeavour you will receive continued training and support and have exceptional earning potential. In essence, you'll get back what you put in and your efforts will be highly rewarded.

If this sounds like the perfect role for you... then Regal is the place to be!

<b>For Office use only</b>	
<b>Date Application Received:</b>	<b>Application No:</b>

**CONFIDENTIAL**



Ardent Road, Falkland Way  
 Barton Upon Humber  
 North Lincolnshire  
 DN18 5RN

Surname (Block Letters): .....

Other names: .....

Address: .....  
 .....  
 ..... Postcode: .....

Telephone: .....

Current Driving Licence: YES / NO

Details of current endorsements: .....  
 .....  
 .....

**Education and Training**

.....  
 .....  
 .....

Details and results of any examinations taken: .....  
 .....  
 .....

Further education (e.g. technical college, evening classes): .....  
 .....  
 .....

**Work History**

Present: .....  
Address: .....  
.....  
.....  
Job title: .....  
Duties: .....  
.....  
Rate of pay: .....  
Date: From: .....  
To: .....  
Reason for leaving or considering leaving.....  
.....

Please tell us about any other jobs you have done and about the skills you used and/or learned in those jobs.

Please tell us why you're applying for this self-employed position and why you think you are the best person for the role.

If you have any disability please tell us about any adjustments we may need to make to assist you at interview: .....

Please tell us if there are any dates when you will not be available for interview: .....

**Data Protection Notification: (please read carefully before signing this application)**

The information you have provided in completing this application form will be used to process your application for self-employed status. The Company will keep the information you have supplied confidential and will not divulge it to third parties, except where required by law, or where we have retained the services of a third party representative to act on your/our behalf.

AUTHORISATION: I have read the Data Protection notification and understand and agree to the use of my personal data in accordance with the Data Protection Act, 1998.

Signed: ..... Date: .....

I confirm that the above information is correct and that any false or misleading information will give Regal Fish Supplies Ltd the right to terminate any Self Employed work offered.

Signed:..... Date.....

**REGIONAL INDEPENDENT CONSULTANT**

**Please complete and send back with your application pack:**

Have you had any experience in Sales before?

.....  
.....

How would you feel about cold calling customers?

.....  
.....

Have you ever had to work anywhere where performance is measured, i.e. target driven?  
If not how would you feel about this?

.....  
.....

Does late finishing concern you?

.....  
.....

Would you enjoy working outdoors in all weathers?

.....  
.....

Have you ever had to work as a team?                      Yes/No

If so what did you contribute to the team?

.....  
.....

If you were knocking on a door and they didn't answer (you know that they are in) what would you do?

.....  
.....

What would you do if someone said they were vegetarians?

.....  
.....

How would you deal with a customer who said No?

.....  
.....

Please fill in the questionnaire and send back with your application pack.

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| ▪ Have you ever been refused motor vehicle insurance or continuance thereof? | <input type="checkbox"/> | <input type="checkbox"/> |

*Comment*.....

.....

- |   |                          |                          |
|---|--------------------------|--------------------------|
| ▪ Suffered or are suffering from any disease, physical or mental infirmity which could affect your ability to drive including diabetes, fits or any complaint of the heart? | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|

*Comment*.....

.....

- Have you during the last 5 years been convicted of any of the following motor offences:-

- |   |                          |                          |
|---|--------------------------|--------------------------|
| - Manslaughter  | <input type="checkbox"/> | <input type="checkbox"/> |
| - Causing death by dangerous driving  | <input type="checkbox"/> | <input type="checkbox"/> |
| - Dangerous driving   | <input type="checkbox"/> | <input type="checkbox"/> |
| - Driving under the influence of drink or drugs                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| - Failing to stop after an accident   | <input type="checkbox"/> | <input type="checkbox"/> |
| - Any offence or combination of offences which resulted in suspension from driving. | <input type="checkbox"/> | <input type="checkbox"/> |

*Comment*.....

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