**Application Form Date:**

|  |  |
| --- | --- |
| **\*Full Applicant’s Name (Mr./Mrs./Dr.)** |  |
| **Nationality** |  |
| **\*Position** |  |
| **Birthday**  |  |
| **\*Company Name** |  |
| **Number of Registration (at the Ministry of Industry & Trade)** |  |
| **Name of CEO (If different then above)** |  |
| **Year of Foundation** |  |
| **Number of Employees** |  |
| **Address (Street & number)** |  |
|  |  |
| **\*Mailing Address** | P.O. Box Postal Code  |
|  | City  |
| **\*Phone Number** | Direct line  |
|  | Company number |
|  | Mobile number |
| **\*Fax Number** |  |
| **\*E-mail address** |  |
| **Website** |  |
| **\*Classification(s)/Nature of Business**  |  |
| **\*Details of the Company’s activities** |  |
| **Is there a French Capital in your company?(Yes/No)** |  |
| **If so, Percentage of the French Capital in the company** |  |
| **Name(s) of French companies you represent** |  |
| **Name(s) of other companies you represent** |  |
| **2022 Turnover** |  |
| **2022 Turnover from Export (If Any)** |  |
| **\*Introduced to CAFRAJ by** |  |
| **\*Short Brief in 50 Words About Your Company**  |  |

**-Required attachments:**

* Copy of your company’s registration at the Chamber of Commerce or Industry.
* Two personal Photos
* Your Company’s Profile.
* Copy of ID