Merchandiser
Application Form

MIA
wines & spirits international
SWIRL ♦ SIP ♦ SAVOUR

No. 333, Rhapta Road, Westlands
P. O. Box 46157 00100 Nairobi.
+254 721 623 474 | +254 734 781 194
sales@miainternational.co.ke
www.miainternational.co.ke

Personal Details

Full Name: _____
Date of Birth: _____
ID / Passport Number: _____
Mobile Number: _____
Email Address: _____
Residential Address: _____
Emergency Contact Name: _____
Emergency Contact Number: _____

Current Employment Details

Current Employer (if any): _____
Current Salary: _____
Transport Allowance:_____
Other Allowances: _____
Days worked per week: _____
Working Hours: _____
Areas / Locations currently working in:
_____
_____

Merchandising Experience

Do you have merchandising experience?
□ Yes
□ No

If yes, where and for how long?
Company / Brand: _____
Duration: _____

Company / Brand: _____
Duration: _____

Do you have experience merchandising alcoholic beverages / wines / spirits?
□ Yes
□ No

If yes, please describe:
_____
_____
_____

Outlet Coverage Experience

Which types of outlets have you worked with?
□ Supermarkets
□ Wine & Spirits Stores
□ Hotels
□ Restaurants
□ Bars / Clubs
□ Distributors / Wholesalers

List major outlets you have serviced:
_____
_____

Merchandising Skills

Which of the following tasks have you performed?

□ Shelf arrangement / facing products
□ Stock rotation (FIFO – First In First Out)
□ Building promotional displays
□ Pricing checks
□ Competitor monitoring
□ Order taking / stock replenishment
□ In-store tastings or activations
□ Other: (please specify)_____
_____

Merchandiser
Application Form

MIA
wines & spirits international
SWIRL ♦ SIP ♦ SAVOUR

No. 333, Rhapta Road, Westlands
P. O. Box 46157 00100 Nairobi.
+254 721 623 474 | +254 734 781 194
sales@miainternational.co.ke
www.miainternational.co.ke

Sales & Performance Tracking

Average number of outlets visited per day: _____
Average sales generated per month (if applicable): _____
Have you worked with sales targets?
□ Yes
□ No
If yes, what was your monthly target?
_____

Competitor Monitoring

Have you previously reported competitor activity?
□ Yes
□ No

Examples of competitors monitored:
How often did you submit reports?
□ Daily
□ Weekly
□ Monthly

Compensation Structure

Salary: _____
Transport Allowance: _____
Communication Allowance: _____
Other Allowances: _____
Sales Incentive Structure:
Monthly Target for Incentives: _____
Bonus Structure (if applicable):
_____

Credit Responsibility

Have you handled product credit or stock on credit?
□ Yes
□ No

Availability

Are you available for merchandising assignments immediately?
□ Yes
□ No
□ Other: _____

Agreement

I confirm that the information provided above is true and correct.

Merchandiser Signature: _____

Date: _____

Director Signature: _____

Date: _____