



Partner Application

Thank you for your interest in becoming a Revelation Software Solution Partner.

Components of the Solution Partner Program include sales, marketing, training and product support tools for partners to deliver Revelation based solutions to targeted industries like Healthcare, Financial Services, Retail and Government.

In today's highly competitive business climate, it takes a team to provide the complete and well integrated solutions that customers require. We therefore recognize that a commitment to close alliances with our partners is critical to delivering these customer solutions.

A key aspect of Revelation's new Solution Partner Program is the ability to provide our partner's access to world-class products and a large installed base of customers. We see this program as being attractive for new organizations and bringing new opportunities for our existing partners.

The information you provide to Revelation Software in this application will be used to qualify you to be included in either our VPA or Solution Partner Program. Please complete all sections, then fax to: +61 2 9939 6366. A signed copy must be mailed with the appropriate program fee payable by cheque or purchase order to:

**Revelation Software Australia Pty Ltd
PO Box 300
Brookvale NSW 2100
Australia**

We'll respond to you within 30 days of applying. If accepted, you'll receive a contract, and a Solution Partner Program Welcome Kit containing specific details such as technical support contact names, and product training information.

You will find an FAQ at the end of the application form. If you have any questions or comments, please feel free to contact us by phone on +61 2 9939 6366, by fax to +61 2 9939 6366 or by e-mail to partners@revelationsoftware.com.au

Yours sincerely,

**David Goddard
Revelation Software Australia Pty Ltd**

REVELATION

S O F T W A R E

Section A: Company Information

Instructions:

Please complete all questions. You must supply a street address. PO Boxes will not be accepted.

Business Name: _____

Trading Name: _____

Street Address: _____

City: _____

State/Province: _____

Postal Code: _____

Country: _____

Telephone: () _____

Facsimile: () _____

Toll Free Telephone: _____

Web Site: _____

E-Mail Address: _____

ABN/Company No: _____

Primary Contact: _____

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Please check the description that most accurately represents your business:

- | | | |
|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Subsidiary |
| <input type="checkbox"/> Division | <input type="checkbox"/> Sole proprietorship | |

How long has your company been in business?

- | | | |
|---|--|---|
| <input type="checkbox"/> Less than one year | <input type="checkbox"/> 4 to 6 years | <input type="checkbox"/> More than 10 years |
| <input type="checkbox"/> 1 to 3 years | <input type="checkbox"/> 7 to 10 years | |

How many full time employees do you currently have on staff?

- | | | |
|-----------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 26 to 100 | <input type="checkbox"/> 5001 to 1000 |
| <input type="checkbox"/> 2 to 10 | <input type="checkbox"/> 101 to 250 | <input type="checkbox"/> 1000+ |
| <input type="checkbox"/> 11 to 25 | <input type="checkbox"/> 251 to 500 | |

Of those employees what percentage are dedicated to:

___ Sales ___ Technical ___ Support

Please indicate your approximate annual revenue (check one):

- | | | |
|---|---|--|
| <input type="checkbox"/> Less than \$50,000 | <input type="checkbox"/> \$250,001 to \$500,000 | <input type="checkbox"/> More than \$1,500,001 |
| <input type="checkbox"/> \$50,000 to \$100, 000 | <input type="checkbox"/> \$500,001 to \$1,000,000 | |
| <input type="checkbox"/> \$100,001 to \$250,000 | <input type="checkbox"/> \$1,000,001 to \$1,500,000 | |

Please estimate the number of Revelation licenses your company will sell or influence in the next year:

- | | | |
|-----------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> 1 to 10 | <input type="checkbox"/> 51 to 100 | <input type="checkbox"/> 1001 to 2000 |
| <input type="checkbox"/> 11 to 25 | <input type="checkbox"/> 101 to 500 | <input type="checkbox"/> over 2000 |
| <input type="checkbox"/> 26 to 50 | <input type="checkbox"/> 501 to 1000 | |

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Section B: Product and Service Information

Instructions:

Information you provide in this section may be used in the Revelation Partner Forum on the Revelation Software's web site. Note: The information in this section may be published or provided to companies outside of Revelation Software.

1. Of your solutions business, please indicate the approximate percentage of revenues (totaling 100%) derived from small, medium, and large-sized business as it applies to Revelation technology or products:

____% Small (businesses with fewer than 100 employees)

____% Medium (businesses with between 100-2,500 employees)

____% Large (businesses with more than 2,500 employees)

2. What is your primary geographic territory?

- | | | |
|---------------------------------------|---------------------------------|--|
| <input type="checkbox"/> Asia Pacific | <input type="checkbox"/> Europe | <input type="checkbox"/> North America |
| <input type="checkbox"/> Australia | | |
| <input type="checkbox"/> New Zealand | | |
| <input type="checkbox"/> Hong Kong | | |
| <input type="checkbox"/> China | | |
| <input type="checkbox"/> Singapore | | |
| <input type="checkbox"/> Other _____ | | |

3. Please indicate your company type as it applies to your activities or proposed activities with Revelation products (you can choose more than one. If you do please apply a percentage to each type adding up to 100%):

- | | | |
|--|-----------------------------------|---|
| <input type="checkbox"/> Software Consultant | <input type="checkbox"/> Reseller | <input type="checkbox"/> Systems Integrator |
| <input type="checkbox"/> Third Party Software Provider | <input type="checkbox"/> Training | <input type="checkbox"/> Other _____ |

4. Please indicate what professional services your company offers:

- | | | |
|--|---|--|
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Training | <input type="checkbox"/> Custom software development |
| <input type="checkbox"/> Systems Integration | <input type="checkbox"/> Line of business solutions | <input type="checkbox"/> Database design & development |
| <input type="checkbox"/> Client/server design & implementation | <input type="checkbox"/> Workgroup automation | <input type="checkbox"/> Technical Support |
| <input type="checkbox"/> Other _____ | | |

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5. Please indicate the market segments that are your company's primary focus (you may check more than one).

- | | | |
|--|--|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Distrib./Wholesale | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> Document Mgmt. | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Education | <input type="checkbox"/> Mapping/GIS |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Engineering | <input type="checkbox"/> Medical/Health Care |
| <input type="checkbox"/> Biotech./Science | <input type="checkbox"/> Fed. Gvrmt. | <input type="checkbox"/> Publishing |
| <input type="checkbox"/> Banking/Finance | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Radio/TV |
| <input type="checkbox"/> Business | <input type="checkbox"/> Healthcare | <input type="checkbox"/> Sales/Marketing |
| <input type="checkbox"/> Bus. Engineering | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Chem./Pharm. | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Retail/POS |
| <input type="checkbox"/> Comm./Email | <input type="checkbox"/> Image Proc/ Multmd. | <input type="checkbox"/> Scientific |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Information Systems | <input type="checkbox"/> Software |
| <input type="checkbox"/> DTP./Graphic Design | <input type="checkbox"/> Trans | <input type="checkbox"/> State/Local Gov. |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Insurance | <input type="checkbox"/> Telecom |

6. What are or will be your company's Revelation product or service specialties?

- | | | |
|--|---|--|
| <input type="checkbox"/> Client/Server Development | <input type="checkbox"/> Migration to Windows | <input type="checkbox"/> Database Development |
| <input type="checkbox"/> Migration to Web | <input type="checkbox"/> Reporting | <input type="checkbox"/> Lotus Notes development |
| <input type="checkbox"/> Other _____ | | |

7. List other vendors whose products you have authorization to resell (check all that apply):

- | | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> Apple | <input type="checkbox"/> Jbase | <input type="checkbox"/> Raining Data |
| <input type="checkbox"/> Accusoft | <input type="checkbox"/> Lotus | <input type="checkbox"/> Reality Systems |
| <input type="checkbox"/> BEA Systems | <input type="checkbox"/> Microsoft | <input type="checkbox"/> Sun Micro. |
| <input type="checkbox"/> Borland | <input type="checkbox"/> Novell | <input type="checkbox"/> SCO/Caldera |
| <input type="checkbox"/> Hewlett-Packard | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Sybase |
| <input type="checkbox"/> IBM D2 | <input type="checkbox"/> Oracle | <input type="checkbox"/> Via Systems |

8. Are you a Microsoft Solution Provider?

Yes No

9. Are you a Lotus Notes Business Partner?

Yes No

10. Are you a Novell Authorized Reseller?

Yes No

11. Are you a part of any other company's partner programs?

Yes No

If yes, please specify _____

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Section D: Contact Information

Primary Program Contact (coordinates on-line information with Revelation Software):

Name: _____

Title: _____

Telephone: () _____

Facsimile: () _____

E-Mail Address: _____

Street Address: _____

City: _____

State/Province: _____

Postal Code: _____

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On-line Contact

(Customers can contact this person if they have questions):

Name: _____

Title: _____

Telephone: () _____

Facsimile: () _____

E-Mail Address: _____

Street Address: _____

City: _____

State/Province: _____

Postal Code: _____

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Section E: References

Instructions:

You must provide customer references, including a description of the services you provided to each customer. You may attach any additional materials that reference your expertise.

Two Business Referrals:

- 1) Customer bus.name _____
Telephone (_____)_____

- Description _____

- 2) Customer bus.name _____
Telephone (_____)_____

- Description _____

Section F: Authorization Signature

I am an officer of the above-listed company, and I certify that the information provided in this application is true to the best of my knowledge. I also give Revelation the right to publish and otherwise relay the information provided in Section B.

Signature: _____ Date: _____

Name (print): _____

Title: _____

Solution Partner Program Frequently Asked Questions

1. Who is eligible for the Solution Partner Program?

Currently we plan to extend the Solution Partner Program to all our partners as defined below:

Value Added Reseller - Value Added Resellers drive the sales process, which leads to product sales of Revelation products. Value Added Resellers may deliver services but license revenue is the primary revenue driver.

System Integrator - System Integrators provide network services, consulting, custom application program development and integration with Revelation products. System Integrators may resell Revelation licenses but services are the primary revenue driver.

Consultant - Consultants provide business, technical development and training expertise. Consultants may resell Revelation licenses but services are the primary revenue driver.

Independent Software Vendor - Independent Software Vendor own, develop, distribute, and support commercially available application programs that are built from or integrated with Revelation products and are found in our ISV catalogue.

2. What if I'm not sure what type of partner I am?

Since we are using this program to help deliver the right level of services to you, please contact us directly if you are unsure. We'll help you work out which type of partner you should be.

3. Will I still be able to license products directly from Revelation?

Absolutely. We plan to continue to offer you direct access to Revelation for all product, training and services. However, as we announce our new VARs and SIs, you may find it convenient and in some cases more cost effective to license product and receive training services directly from a VAR or SI.

4. So, what's the big difference between the VPA and Solution Partner Program?

In sum, the VPA was originally designed as strictly a volume purchase agreement with very little business and technical support, and no real marketing programs to enable you to build a business around Revelation. Most of the value received by participants enrolled in a VPA was the volume discounts, and most of the types of participants in the program were end-users. Today the SPP provides both a volume discount schedule that is greater than the VPA discount schedule, and the additional business and technical services to support your investment in building a business on Revelation products and services

5. This sounds good, but can I still remain in the VPA program?

This answer is yes, but to maintain your current volume discount, you must meet the new VPA requirements. Remember, the VPA is primarily designed for end-users buying larger volumes of Revelation products with no intentions to either reseller or build custom solutions or services for external use.

6. If I move to the Solution Partner Program, will I be able to maintain my current VPA discount?

No, your VPA volume discount will no longer be applicable. To be eligible for the SPP volume discount you must achieve a minimum of \$10,000 in net license and support revenue. However, as we introduce the new program we plan to offer grace periods. Please contact us directly for more details.

7. Is there a commitment to join the Solution Partner Program? What does it cost?

The answer is yes. For VARs and SIs there is a small one-time program fee of \$1,750, plus a commitment to have trained sales and technical consultants on staff. However, in return we offer among some of the planned benefits a host of priority technical support services, new ROI tools, and new lead generation and joint marketing services. Again our promotion to previous VPA participants is to waive the initial program fee.

8. What are the benefits of being in the Solution Partner Program?

Your individual benefits will depend upon what type of partner you join up as. Please contact us directly to get more detail on the types of feature benefits provided to VARs, SIs, ISVs and Consultants

9. What type of Return on Investment can I expect as member in the Partner Program?

Your individual ROI will depend upon the type of partner you sign up as. We plan to offer self-help ROI tools that will help you determine your individual return. Right now we expect this to be well above 100% ROI within the first 12 months, but please check back with us for more details.