



Zebra® PartnerConnect Program:

Application Guide

RESELLER

TABLE OF CONTENTS

- Overview 3**
 - Let's Get Started 3
 - Have questions about PartnerConnect? 3
 - Submitting the Application 3
 - Application Work Flow 3
- Getting Started 4**
 - Application Command Buttons 4
 - Step 1 – Become a Partner 4
 - Step 2 – Company Applicant Details 5
 - Step 3 – Company Location Details 6
 - Step 4 – Company Information 7
 - Step 5 – Company Sales and Revenue 7
 - Company Personnel & Services 8
 - Step 6 – Company Contacts 9
 - Step 7 – Anti-Corruption and Bribery 10
- How to Contact Us 11**

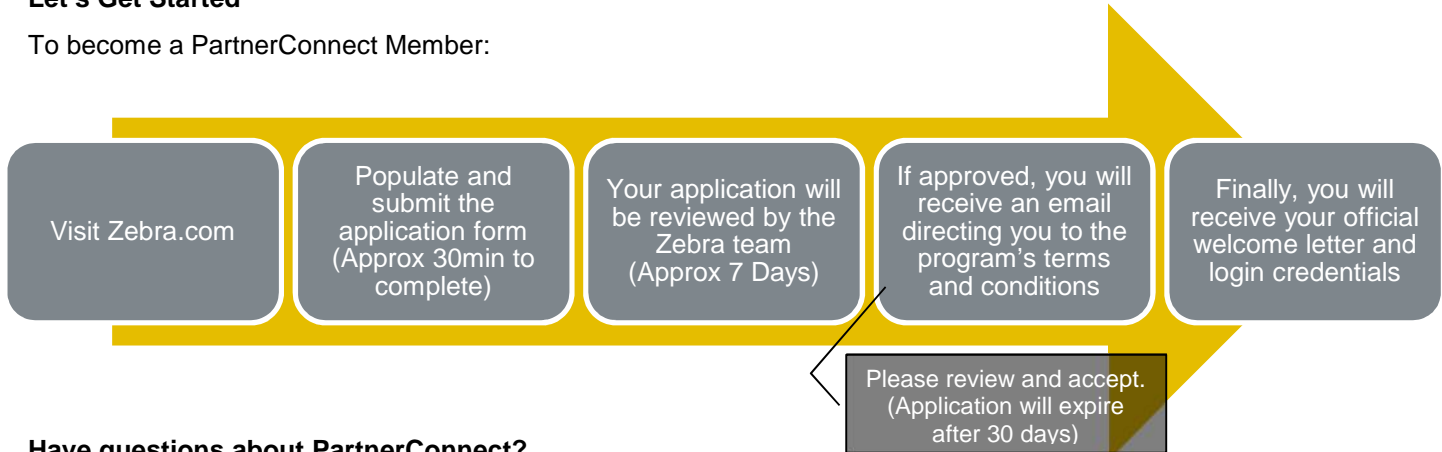
INTRODUCTION

Overview

Behind every great channel is a great channel program. We're pleased to present the Zebra® PartnerConnect program, our integrated partner program designed to enable your success. PartnerConnect is built with your needs in mind. We encourage you to take a few moments to review the application details below to assist you in completing your application to PartnerConnect. PartnerConnect comprises several different program tracks that are custom-built for different partner business models. This approach helps your company to differentiate itself in the marketplace and enables us to reward you through targeted program benefits.

Let's Get Started

To become a PartnerConnect Member:



Have questions about PartnerConnect?

Zebra's [Partner Interaction Center](#) provides support to channel partners in a number of languages during normal business hours.

Submitting the Application

Now that you have decided to apply for the **Zebra® PartnerConnect program** ("PartnerConnect"), we want to make sure you have the right information available to submit your application. This worksheet provides you with a list of the fields you will be asked to populate as you complete the online process. The online application process walks you through seven (7) steps. For details on ISV application questions, please [CLICK HERE](#).

Note – If you need to apply for both the Reseller and ISV programs, please submit a single application now. Once approved you can apply for the additional program to be added to your Zebra relationship.

Application Work Flow

[STEP 1](#) – Become a Partner

[STEP 2](#) – Company Applicant Details

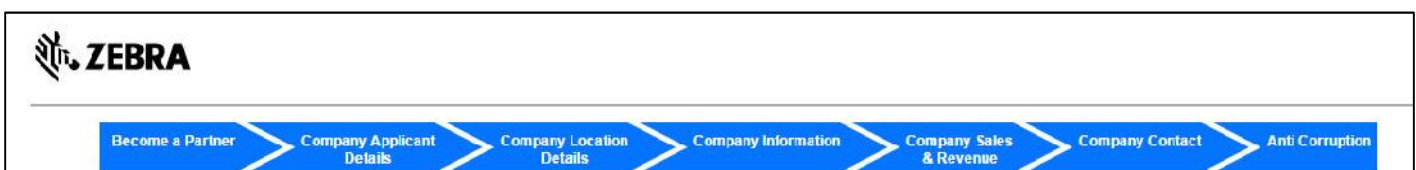
[STEP 3](#) – Company Location Details

[STEP 4](#) – Company Information

[STEP 5](#) – Company Sales & Revenue

[STEP 6](#) – Company Contact

[STEP 7](#) – Anti Corruption



GETTING STARTED

Application Command Buttons

Command buttons allow you to easily navigate and save and finish the application for later.

Button	Description
Next	Move to the next page (section) in the application. (The “Next” button will only be displayed once all required fields have been completed.)
Previous	Move to the Previous page in the application to add / correct / view information.
Finish Later	Saves current application details to allow you to finish later. (Note you will receive an email notification with a new URL link. If you wish to return to your saved application, use the new URL Link in the notification.)
Copy	Copy the Primary Location Address Details into the Headquarter location address details.
New Contact	Add a New Contact to the partner application.
Submit	Submit Application.

Step 1 – Become a Partner

The first section of the partner application asks a few introductory questions regarding the program you are applying for, you will be asked to provide the following information:

Field	Description
Is your company a current partner in the Zebra® PartnerConnect program?	Select Yes or No depending on your status within the PartnerConnect program. (<i>Default option is No</i>). If you select Yes, please go to Partner Gateway to learn more about the Relationship Change Application process.
What kind of partner would you like to be?	This drop-down list allows you to select whether your organization is seeking to become a Reseller or an Independent Software Vendor (ISV) with Zebra. <ul style="list-style-type: none">) A Reseller is a company or individual (merchant) that purchases goods or services with the intention of selling them rather than consuming or using them.) An ISV is an individual or business that builds, develops and sells consumer or enterprise software. Although ISV provided software is consumed by the end users, it remains the property of the vendor. An ISV is also known as a software publisher. (ISV partners will only be able to purchase open products* if they are also a Reseller in the program.) <i>*Open Products – a large percentage of Zebra products are available to all PartnerConnect resellers as well as resellers not participating in the program.</i>
In what region do you want to represent Zebra Technologies as a Channel Partner?	Select from North America (NA), Latin America (LATAM), Europe and the Middle East (EMEA) and Asia-Pacific (APAC) regions.
In what country(ies) do you want to represent Zebra Technologies as a Channel Partner?	Multi-pick selection field. Allows you to select one or many countries. (<i>Not required for EMEA or APAC</i>)
Please select your preferred language.	Select your preferred language from the drop-down list. Support is available by our Partner Interaction Center (PIC) in all languages listed for selection. Application questions will change to preferred language on selection.
How did you hear about our program? Please provide the name of the Zebra Distributor / Employee / Other	This drop-down list identifies how you learned about the PartnerConnect program. Depending on your selection you may be asked for additional details.

Field	Description
Do you currently purchase through distribution?	Select Yes or No depending on your method of purchase. If you select Yes, you will be asked to provide details of your current Distributors.
Please provide the name of the Distributor(s).	If you utilize more than one Distributor, please use comma to separate.

Step 2 – Company Applicant Details

This section asks for the contact information for the company representative submitting the application. You will be asked to provide your name, email contact information and a description of your role. For an explanation of Roles, please [click here](#) to download description sheet.

Field	Description
First Name	Select Salutation and type in your First Name.
Last Name	Type Last Name (Surname / Family Name).
Business Email Address	Work email address where the employee can be contacted. Email Address should contain the company domain. (ie @zebra.com) <i>Note: This must be a unique email address for each contact on application.</i>
Primary Role	Select the most accurate role describing the employee's job description. For example -if you are a Sales Director (select Executive as Primary and Sales as Secondary)
Secondary Role	Select any additional roles that describe the employee's job responsibilities.
Country Code & Phone Number	Type country code and phone number where the employee can be contacted. (Example: Country Code = 44 / Phone Number = 01628 556000)
Country Code & Mobile Number	Type country code and mobile phone number where the employee can be contacted. (Example: Country Code = 44 / Phone Number = 01628 556000)
Should this contact be authorized as a Partner Administrator on behalf of your company?	Select Yes or No. (<i>Note: at least one contact must be a Partner Administrator (PA). If No is selected, you will be required to identify a Partner Administrator in the contact section of the application.</i>) It is highly recommended that the person you nominate as PA is in an “office admin” role within your company, is used to dealing with administering details and <u>NOT</u> an executive or senior member of staff. The Partner Administrator (PA) role will receive copies of all communications sent to other contacts and will be responsible for maintaining your company profile and contact details.
On behalf of the company, I have read and reviewed the Partner Administrators Roles and Responsibilities and confirm that appropriate contact will be assigned this responsibility.	Select Agree . The Partner Administrator function provides a designated individual with access to the company's partner record—specifically the Partner Profile, contact data, and deal and influence registration systems. The designated individual will be required to update the data held in our systems and manage the tool permissions for the employees of their company. They will also be responsible for verifying that they have completed certain business activities or achieved business attributes by completing the self-certification process prior to the company's annual compliance review. A Partner Admin will automatically be assigned all role types as a secondary role to ensure they receive copies of all notifications. To continue with the application, you must agree to this question.

Step 3 – Company Location Details

Next, you will be asked to provide the following information about your company name, as well as the address for your primary business location and headquarters.

Field	Description
Company Legal Name	The full legal name of the company. <i>(This can be in local language.)</i>
Company DBA / Trading Name	Name used for advertising, marketing and sales purposes. (This will be used in the Zebra online channel partner directory).
Company Name (English)	Company Local Name. <i>(If Local Language was used in Company Legal Name Field, please provide Company Name using the English alphabet.)</i>

Field	Description
Primary Location Address 1	Physical address of the company primary place of business (street number and name).
Primary Location Address 2	Additional information, such as suite number.
Primary Location Town/City	Town/City of company primary location.
Primary Location Country	Country for company primary location.
Primary Location State / Province	State / Province for company primary location.
Primary Location Postal Code	Postal Code for company primary location.
Primary Location Country Code & Phone Number	Type Country Code and Phone number for company primary location.
Headquarters Address 1 Headquarters Address 2 Headquarters Town/City Headquarters State Province Headquarters Country Code & Phone Number	Enter Headquarters location information if not the same as the primary location. <i>(If address is same as Primary Location select Copy)</i>

Step 4 – Company Information

To help us to process your application, please provide information about your primary business model, website, as well as a brief description of your company and the value you bring to the market.

Field	Description
Company ID Type	Identifies the type of company; the information is specific by region, state or legal form of the company. Options include: Government ID, VAT registration ID, tax registration ID, not applicable or Other (depending on region).
Company ID If an ID type is selected, enter the associated number in this field	Enter the associated number for the Company ID type identified.
Which business model best reflects your company's go-to-market approach?	This drop-down list allows you to select whether your organization is a Value-Added Reseller, Systems Integrator, Retail Store, etc.; select the one that best represents your organization.
For what product segment(s) are you delivering repair/break fix services?	Select all product segments that apply.
Do you develop any software / firmware solutions?	Select Yes or No.
What categories of product do you sell?	Select all products that apply.
Do you participate in partner programs of other vendors?	Select Yes or No.
What other partner programs do you participate in? What level have you achieved?	If Yes is selected above, please provide details of what other partner programs you currently participate in and what level you have achieved. This will assist us in identifying the correct program for you within the PartnerConnect program.
Primary Company Website	Identify your primary website in the available field, using this format: www.website.com.
Does your company utilize or have any other websites?	Select Yes or No. If yes, additional questions below will be required.
Please provide any e-commerce websites associated with your company. If more than one, use comma to separate.	Identify any e-commerce websites associated with your company, using this format: www.website.com. <i>(If more than one, use comma (,) to separate)</i>
Please provide any third-party market place websites you utilize to advertise / promote Zebra products. If more than one, use comma to separate.	Identify any third-party market place websites you utilize to advertise Zebra products. <i>(If more than one, use comma (,) to separate)</i>
If there are any additional websites associated with your company, please provide the additional URL(s). If more than one, use comma to separate.	If you have any other websites associated with your company not previously provided, please provide details. List all that apply separated by commas.
Provide a short description of your company and the value you provide to the market (Max 300 words). (Note that these details may be used on the Zebra Technologies Partner and Application Locator)	Provide a concise description of your company and the value it provides to the market so potential customers can understand your offerings and differentiators. Note that by providing this information, you agree that these details will be used on the Zebra Technologies Partner Locator / Application Locator website (if applicable). This can be provided in local language. (Please try and limit this to a maximum of 300-words)

Step 5 – Company Sales and Revenue

Next, please identify the primary industry on which your organization focuses, along with the percentage of revenue derived and the solutions your organization provides.

Field	Description
What was the total sales and services revenue generated by your company in its last fiscal year (USD)?	Select the range from the drop-down list with dollar ranges.
What percentage of your revenue directly results from the following sales methods in the last fiscal year (must total 100%): Face to Face / Field Sales; Via Internet with limited human interaction; Telephone Based Consultative Sales Resources	Identify the go-to-market strategy for your organization using the percentage breakdowns for each approach listed. The percentages must total 100%.
Do you have a single primary vertical market?	With a pick-list value of Yes or No. <i>A vertical market is a market in which a vendor offers goods and/or services to a specific industry / trade / profession (ie Education, Retail, Manufacturing)</i>
What is your company's primary vertical market focus?	If Yes is answered for single primary vertical market question, choose from the available drop-down list or choose the option most closely represented.
Do you provide integration with POS systems?	If your primary vertical market is Retail or Hospitality, please identify if you provide integration with Point of Sales (POS) systems.
Please provide the percentage of your business revenue derived from this market segment.	Enter the applicable percentage. This should be an overall percentage of all product revenue obtained from your primary vertical market.
What are the primary vertical market segments that your company focuses on?	Select from drop down list. (Options provided will be dependent on the primary vertical market you selected.)
What is the most significant industry market your company focuses on? (Application)?	This is an optional question. Please provide additional details if relevant.
Select all other significant vertical markets your company is active in.	Not including primary vertical above, please indicate any other significant vertical markets your company focuses on. This should be based on the company's overall products. <i>(An industry/vertical market is a market in which a vendor offers goods and/or services to a specific industry / trade / profession (i.e. Education, Retail, Manufacturing)</i>
Please select the cross vertical market focus for your company?	Depending on your response on single primary vertical, select from available drop-down list or choose the option most closely represented.
Provide the names of the top three manufacturers whose products you purchase in rank order from high to low.	Please provide names of the top three manufacturers whose products you purchase in order from high to low.
Identify by percentage the revenue your company derives from each of the following categories (must total 100%): Hardware; Software; Support Services (Repair, Software and Hardware Technical Support); Supplies; Professional Services (Consulting, Applications, Learning and Deployment); Managed Services (Device Management and Device Visibility); Cloud Services.	The percentages must total 100%- <i>Note: When entering percentages: If percentage fields are filled with incorrect value(s) none of the other required fields will be validated. Error messages will only appear to correct percentage fields. Once you correct percentage fields and try to submit the page, error message appears to fill other required fields.</i>

Company Personnel and Services

Next, please provide details regarding the employees and breakdown of employee responsibility for your organization. If a person has multiple roles, please only count them in one category.

Field	Description
Total Number of Company Employees	Number of total employees.
Total Number of Sales Employees	Number of full time, dedicated sales employees.

Field	Description
Total Number of Services and Technical Support Employees	Number of full time, dedicated services and technical employees.
Total Number of Marketing Employees	Number of full time, dedicated marketing employees.
What customer service and support do you offer your customers?	Helpdesk support / Customer Support Solution Applications / Break-Fix / Technical Support / Diagnostics. Please select if it is Complementary, Fee Based or Not Offered.
If customer service and support is not offered, indicate how you currently manage customer support?	If not offered is provided for all sections in above question, please provide details on how you manage customer support.
What percentage of customer projects utilize your technical support service?	Enter value for customer projects that utilize your technical services.

Step 6 – Company Contacts

Next, please provide up-to-date information on the best contacts within your company. This information helps us provide relevant information in a timely manner to the right people on your team. For an explanation of what each of the Roles mean, please [click here](#) to download an instruction sheet.

The “Required Contacts to be added” section will highlight in **red** any contact types that are missing and need to be added before you can continue with the application – Please scroll down and select “New Contact”.

Field	Description
Contact Business Email Address	The work email address where the employee can be contacted. <i>Note: This must be a unique email address for each contact.</i>
Contact Country Code and Phone Number	Type Country Code and the phone number where the employee can be contacted. (Example: Country Code = 44 / Phone Number = 01628 556000)
Contact Country Code and Mobile Number	Type Country Code mobile phone number where the employee can be contacted. (Example: Country Code = 44 / Phone Number = 01628 556000)
Contact Preferred Language	The Preferred Language for the contact. Support is available by our Partner Interaction Center (PIC) in all languages listed for selection.
Contact Primary Role	The most accurate role relating to the employee’s job description.
Contact Secondary Role(s)	Any additional roles that describes the employee’s job responsibilities.
Should this contact be authorized as a Partner Administrator on behalf of your company?	The partner admin is responsible for performing all necessary administrative functions for their organization. Example duties include: maintaining company’s profile, maintaining contacts, etc. Please note, at least one contact must be a Partner Administrator.

To move to the next section of the application please ensure the following contact roles / numbers have been provided:

- At least one (1) Partner Administrator (Maximum of two (2)).
- At least one (1) Key Contact.
- At least one (1) Executive.

One contact can have multiple roles. Add additional roles in the “Secondary Role” field.

All role types are required to ensure role related informational notifications are received. (For an explanation of what each of the Roles mean and what notifications they will receive, please [click here](#) to download an instruction sheet.). If a contact serves multiple roles, please ensure all are included in the “Secondary Role” field. Your Partner Admin will be able to add additional contacts on approval to the PartnerConnect program.

Step 7 – Anti-Corruption and Bribery

Finally, please provide information regarding your company’s compliance with any required anti-corruption laws and regulation. If you answer Yes to any of these questions, you will be prompted to provide additional information. These questions are identified with an asterisk (*). Please note that questions are pre-populated with the answer No.

Field	Description
Other than Applicant Company do you plan to use any other companies including your own subsidiaries, affiliates or individual person (other than your company’s employees) to resell products or services for Zebra such as a sub-distributor or sales agent?	Please select Yes or No
Please select all the countries where your company will conduct business and / or ship Zebra products or supplies on behalf of Zebra?	Select all that apply.
Does your company have a Code of Business Conduct?	Please select Yes or No as it applies to your company.
*If yes, how often do you provide training to your employees on your Code of Conduct?	Utilize the drop-down list to indicate how often your employees are trained.
Does a current or former government employee or any member of his immediate family have an ownership interest in your company? *	Please select Yes or No as it applies to your company.
*If yes, what percentage of ownership does the person have?	Enter the percentage of ownership in the box provided.
Is a current or former government employee or current or former employee of a Government-owned company or any member of his immediate family, employed by your company? *	Please select Yes or No as it applies to your company.
*If yes, please identify the employee(s).	Please list the names for all of the employees that apply.
Is a current employee or other individual who will be representing Zebra related by birth or marriage to any current or former government official or current or former employee of a Government-owned company who is in position to influence the purchase of the Zebra products or services that your company will be selling? *	Please select Yes or No as it applies to your company.
*If yes, please provide the employee’s name(s).	Please list the names for all of the employees that apply.

Once you have completed all the required anti-corruption and bribery questions, you must read and agree to the certification status. After reviewing your answers, click **Submit** to submit your application.

Field	Description
I certify that I, and the company that I hereby represent, will abide by all applicable anti-corruption laws and regulations, including but not limited to, the U.S. Foreign Corrupt Practices Act, the U.K. Bribery Act, and similar anti-corruption laws, and will conduct business without the use of bribery, in any form.	Select agree if you agree to the statement. Click Submit to submit your application.

Note: You will receive a thank you email notification from the Partner Interaction Center (PIC) at Zebra once your application has been submitted. All email communications will contain the application number at the bottom of the email.

If the PIC team need to validate any details they will contact you within the next three days

CONTACT US

How to Contact Us

If you have any further questions, please contact us through one of our Partner Interaction Centers. Zebra's [Partner Interaction Center](#) provides support to channel partners in a number of languages during normal business hours.

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