



Franchising Preliminary Information Sheet

Directions: Please fill out all sections of this sheet. The information requested herein is for initial evaluation of your qualifications as a franchisee and will be kept strictly confidential. Completion of this sheet is not an offer to purchase a franchise and does not obligate you in any way. Should you elect to purchase a franchise, you may be required to furnish additional information.

Part I. General Information

Date: _____ Social Security Number _____

Name _____ Age _____ Spouse's name _____ Age _____

Address _____ City _____ State _____ Zip _____

Home phone (____) _____ Business phone (____) _____

If necessary, may we contact you at your place of business? _____ Yes _____ No

Best time to contact you _____ (a.m.) _____ (p.m.)

Marital Status: ___ Single ___ Married ___ Divorced ___ Children (number)

Ages of children _____ Do you have any health problems? If so, please describe

Does your spouse have any health problems? If so, please describe

Desired area for franchise (city and state) _____

Second choice of location (city and state) _____

Part II. Education

School	Name of school, city, state	Last year completed (circle one)				Last yr. Attended Mo/Yr	Major	Degree
High	_____	9	10	11	12	/	_____	_____
College	_____	1	2	3	4	/	_____	_____
College	_____	1	2	3	4	/	_____	_____
Graduate School	_____	1	2	3	4	/	_____	_____

Part III. Employment History

Please use the spaces below to list employment history within the past five years, or three positions held, starting with most current position.

Dates	Company	Address	Position	Income
____ to ____	_____	_____	_____	_____
____ to ____	_____	_____	_____	_____
____ to ____	_____	_____	_____	_____
____ to ____	_____	_____	_____	_____
____ to ____	_____	_____	_____	_____
____ to ____	_____	_____	_____	_____

Part IV. Financial Information

ASSETS

Checking and Savings \$ _____
Stock and Bonds \$ _____
Real Estate Owned (Home) \$ _____
Real Estate Owned (Other) \$ _____
Other Assets \$ _____
\$ _____
\$ _____
TOTAL ASSETS \$ _____

LIABILITIES

Notes Payable - Banks \$ _____
Notes Payable – Other \$ _____
Real Estate Mortgage Payable (Home) \$ _____
Real Estate Mortgage Payable (Other) \$ _____
Others \$ _____
\$ _____
\$ _____
TOTAL LIABILITIES \$ _____
NET WORTH \$ _____
TOTAL LIABILITIES/NET WORTH \$ _____

Explanations

Other Sources of Income

Will you finance this business venture by cash or loan? If a loan, what is the collateral?

If borrowed from individual, give name, address and occupation

Part IV. References

PERSONAL

Name	Occupation	Address	Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

CREDIT

Name	Type of Account	Address	Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Part V. Other

Have you ever owned or do you presently own a business? If so, please give details

Have you ever made application for a bond that was refused?

Have you ever filed for bankruptcy, had a real estate loan foreclosed, or had any liens against you? If so, please explain.

Have you ever been or are you now a party to any lawsuits? If so, please explain

Have you ever been convicted of any offense? Include traffic violations for which you were fined \$50 or more. If so, explain in full, including date, charge, place, under what name and action taken. Use additional paper if necessary.

I understand that the information provided is confidential and affirm that it is true to the best of my knowledge. I understand that providing this information does not obligate me to purchase a franchise, nor does it obligate the franchiser to offer a franchise to me.

Signature: _____

Date: _____