

FRANCHISEE EVALUATION FORM

PRIVACY POLICY ALL INFORMATION PROVIDED IS KEPT CONFIDENTIAL AND WILL NOT BE DISCLOSED EXCEPT FOR PURPOSES OF VERIFICATION



PLEASE ANSWER ALL QUESTIONS
WRITE CLEAR OR PRINT AND **ATTACH**
A RECENT THREE MONTHS BANK
STATEMENT ALONG WITH THIS FORM

PERSONAL INFORMATION

FIRST NAME		MIDDLE NAME		LAST NAME	
DATE OF APPLICATION / /		BIRTHDATE / /		AGE	
CURRENT ADDRESS		CITY		COUNTRY	
SINGLE		MARRIED		TELEPHONE NUMBER ()	
IF MARRIED		OCCUPATION OF SPOUSE		HOW LONG?	
AGES OF DEPENDENT CHILDREN					

APPLICANT'S FRANCHISE PLANS

WILL THE FRANCHISE BE OWNED AND OPERATED BY YOURSELF OR A GROUP?

PLEASE EXPLAIN FULLY, INCLUDING SHARES OWNERSHIP
MAXIMUM AMOUNT OF CAPITAL AVAILABLE FOR THIS BUSINESS

EDUCATION

PLEASE MENTION THE HIGHEST EDUCATION YOU HAVE RECEIVED
(HIGH SCHOOL, COLLEGE, MILITARY OR SPECIAL TRAINING).

BUSINESS AND EXPERIENCE RECORD

GIVE A COMPLETE RECORD OF YOUR EXPERIENCE, BEGINNING WITH YOUR PRESENT OR LAST POSITION, INCLUDE MILITARY SERVICE, INDICATE BY ASTERISK (*) THOSE EMPLOYERS YOU DO NOT WISH US TO CONTACT.

1.	
2.	
GIVE A BRIEF ON BUSINESSES YOU OWN FULLY OR PARTIALLY.	

REFERENCES

PLEASE LIST THREE PROFESSIONAL AND CHARACTER REFERENCES - NAME-ADDRESS-TELEPHONE
1.
2.
3.
LIST THREE CREDIT REFERENCES-NAME-ADDRESS-TELEPHONE
1.
2.
3.
BANK REFERENCES-NAME-ADDRESS

CONTINGENCIES

Do you have any contingent liabilities?_____ If so, please itemize_____
Are any of your assets pledged?_____ If so, please itemize_____
Are you a defendant in any lawsuits or legal actions?_____
Have you ever taken bankruptcy?_____

In submitting the foregoing application and statement, the undersigned guarantees its accuracy with the intent that it be relied upon in granting a franchise and extending credit to the undersigned and warrants that he/she has not knowingly withheld any information that might affect his/her credit risk, and the undersigned expressly agrees to notify Franchisor immediately in writing of any material change in his/her financial condition whether application for further credit is made or not and in the absence of such written notice, it is expressly agreed that Franchisor in granting a franchise or credit may rely on this statement as having the same force and effect as if delivered upon the date additional credit is requested or existing credit is extended or continued.

The undersigned consents and authorizes Franchisor to conduct a background check which may include investigation of employment history, educational background, criminal history, military records, credit history and department of motor vehicle records. All information derived from the above shall be kept confidential and be used by Franchisor for internal evaluation purposes only.

The undersigned certifies that each part of the application and financial statements hereof and the information inserted herein has been carefully read and is true and correct.

Date _____

Signed _____

OFFICIAL USE ONLY:

Status: APPROVED REJECTED Reason of rejection : _____

REVIEWED BY:

Deepak Thankappan
Franchise Program Developer
Signature _____

Abdullah Al Huraimel
Franchise Manager
Signature _____

Sulaiman al Hayas
Franchise and F&B Manager
Signature _____

Date

Date

Date