

Franchise Application

Personal Information (circle answer when applicable)

Name _____
Last First Middle Spouse

Address _____
Street City State Zip

Home Own Rent How long? _____

Last former address: _____ How long? _____

Home Telephone # _____

D.O.B. _____ Marital status Single Married

Number of children and their ages: _____

Business Experience

Present occupation: _____
Position Company Address Phone

Supervisor: _____ Title: _____ May we contact? _____

Current salary: _____ Employed from: _____ to _____

Spouse employment: _____
Position Company Address Phone

Spouse salary: _____ Employed from: _____ to _____

Education

Last year of school completed: High School 1 2 3 4 College 1 2 3 4 Grad. studies 1 2 3 4

If college graduate, provide name of school: _____

Year Graduated _____ Major _____

Business Reference:

Name Address Occupation Phone Years Known

Personal Reference:

Name Address Occupation Phone Years Known

General Information

1. Have you ever been in business for yourself? Yes No If yes, please explain

2. Have you ever owned a franchise? Yes No If yes, give name of franchise organization

3. Will you devote full time to this business? Yes No If no, Do you have someone to manage?
If yes, please name. _____
4. Will this managing person have an equity investment? _____
5. When will you be available to open your business? _____
6. Do you regard this franchise as Career? Investment? Speculation?
7. Capital available to invest: _____
8. Are you applying this as an individual? or a partnership?

Financial Information

Current Assets

Cash on hand (unrestricted in banks)..... _____
Home-fair market value..... _____
Other savings, stocks, bonds..... _____
Value all other assets / real estate..... _____

Total Assets \$ _____

Current Liabilities

Notes payable to banks / others..... _____
Mortgage payable on home / others _____
Any other liabilities (credit card, etc.)..... _____

Total Liabilities \$ _____

Total Assets minus Liabilities (Net Worth) \$ _____

Annual Total Income (all sources) \$ _____

The under signed certifies that the information on this personal financial statement and any financial information submitted on other forms is true and correct. I authorize Katie's Korner, Inc. to make any additional credit check which it deems necessary.

Date: _____

Signature: _____