



Helen O'Grady
**CHILDREN'S DRAMA
ACADEMY**

"Development through drama!"

FRANCHISE APPLICATION

"CONFIDENTIAL"

NAME _____ DATE _____ 20 _____

FRANCHISE _____ PRICE _____

The attached application is provided to determine your suitability as a Franchisee. It should be completed fully in your own handwriting.

We suggest that the information be current and accurate.

To clarify your financial position you may be requested to produce proof of your financial situation.

Whilst we may contact your referees, we will not disclose the nature of your intended proposition.

This application is not a contract and is not binding on either party. It will be treated as confidential.

Please do not be offended if after preliminary discussions, we consider you unsuitable as a Franchisee. We believe the success of our Franchise Programme has been due to the careful choice of each Franchisee.

Ghim Moh Post Office Box 36 Singapore 912734

Email: nancy@helenogrady.com.sg

Website: www.helenogrady.com.cn

OFFICE USE

(please print)

The information contained in this form is confidential and details will not be divulged to any person without authority.

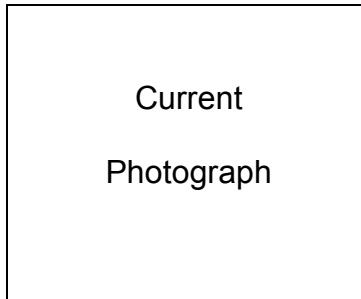
Surname _____ Given Names _____

Address _____

Postcode _____ Phone (Bus): _____ (Priv): _____

Fax _____ Email _____

Date of Birth _____ Age _____ Marital Status _____



Spouse's Name _____ Age _____

No. of children _____ Age of children _____

How long have you lived at your present address? _____

Previous address _____

How long did you live there? _____

HEALTH : poor, fair, good.

Describe any physical disabilities or health problems _____

Have you ever been declared bankrupt? _____

List your interests and special skills _____

Drivers Licence number _____ Where Licence issued _____

OFFICE USE

PRESENT OCCUPATION: (Position) _____

(Company) _____

(Address) _____

(Type of Business) _____

Period of employment with the company _____

Describe responsibilities and number of people supervised : _____

EDUCATION: (Please list any professional degrees of qualifications)

FINANCIAL INFORMATION

	\$		\$
Present Annual Income	_____	Fixed Annual Outgoings	_____
Wages or Salary (after tax)	_____	Mortgage Repayments (see Table 1)	_____
Bonus or Commission	_____	Loan Repayments (see Table 2)	_____
Dividends	_____	Other (provide details)	_____
Other Income (provide details)	_____		_____
_____	_____		_____
_____	_____		_____
TOTAL	=====	TOTAL	=====

FINANCIAL INFORMATION cont...

ASSETS		LIABILITIES	
	\$		\$
Cash on hand	_____	Overdrafts (see Table 2)	_____
Cash in banks/savings Institutions	_____	Creditors (see Table 2)	_____
Bank/Branch.....	_____	Leasing Finance (see Table 2)	_____
Bank/Branch.....	_____	Hire Purchase (see Table 2)	_____
Bank/Branch	_____	Personal Loans (see Table 2)	_____
Other	_____	Other Loans (see Table 2)	_____
Securities (shares, bonds, life insurances, superannuation)	_____	Loans Guaranteed for others (provide details)	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Money due to you (details)	_____	Mortgages Payable (see Table 1)	_____
Real Estate (market Value) (see table 1)	_____	Other Debts (detail)	_____
Your business	_____	_____	_____
Motor Vehicles	_____	_____	_____
Other Assets (detail)	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL	_____	TOTAL	_____

FINANCIAL INFORMATION cont...

TABLE 1 – REAL ESTATE

Property Description & Address	Date of Purchase	Purchase Price	Current Value	Mortgagee	Mortgage Term
		\$	\$		
TOTAL \$					

TABLE 2 - CURRENT LOANS, CREDITORS, OVERDRAFTS, HIRE PURCHASE, LEASING

Lender – Address	Type of Loan	Purpose	How Secured	Term	Date Opened	Original Amount
						\$
TOTAL \$						

QUESTIONNAIRE

In order for both an individual and a company to grow, they must have common goals and beliefs. The following questionnaire will help determine your needs and ascertain whether or not they run parallel to our needs as an organisation. Please be frank with your answers.

1. If you could have any job or position you wanted, what would you do?

2. What qualities do you have that you believe are valuable if you become part of this Franchise?

3. How much time out of every 24 hours do you devote to:
Your occupation _____ Hours
Sleep _____ Hours
Recreation..... _____ Hours
Acquiring useful knowledge _____ Hours
Self-improvement _____ Hours
Family _____ Hours

4. What do you think is likely to make the difference between success and failure in our business?

5. What do you feel has been your greatest accomplishment to date?

6. What has been your greatest disappointment?

7. What have you done in the past year to improve yourself?

8. If approved, how do you visualise your future with this particular Franchise?

9. How much money would you like to make this year with your business?

\$ _____

Your second year?

Your third year?

\$ _____

\$ _____

10. How does your spouse feel about your interest in this Franchise?

11. What do you consider to be your greatest strengths?

12. In our previous meeting which points about the Franchise were most appealing to you?

13. What do people most often criticise you for?

14. What do you most often criticise others for?

15. What factors of the past have contributed most to your own development?

16. What factors would you say have prevented you from seeking a business opportunity sooner?

17. What else do you think we should know about you to understand you better and to determine what your association with us could mean?

18. Based on mutual acceptance, what date can you start?

19. Who among your acquaintances:

Encourages you the most? _____

Cautions you the most? _____

Discourages you the most? _____

20. Why are you considering going into business now?

21. What do you see as the benefits of joining a franchised group in comparison with being on your own?

22. Who do you consider to be the most successful person you have ever met?

Why? _____

OFFICE USE

FINANCIAL PERSONAL REFERENCES

Name _____ Address _____

Telephone _____ Nature of Association _____

Name _____ Address _____

Telephone _____ Nature of Association _____

Name _____ Address _____

Telephone _____ Nature of Association _____

GENERAL INFORMATION

How do you intend to finance your investment?

Is there anything to prevent you devoting your full time to the business?

Will your spouse be actively involved in the business? YES/NO?

If yes, how many days _____ per week, hours _____ per day?

In what capacity would your spouse be involved?

For what period would your spouse be involved?

OFFICE USE

GENERAL INFORMATION – continued

Do you intend to hold the Franchise in a company name? YES/NO?

If yes:- Company Name _____
(ensure these details are completed without abbreviations.)

Registration Number: _____

Place of Incorporation _____

Registered Address _____

Full Names & Addresses of Directors

Who do you bank with? _____ Branch _____

Accountant's Name _____

Telephone Number _____

Solicitor's Name _____

Telephone Number _____

I understand that the purpose of this application is to assess my suitability as a Franchisee. It does not obligate the Franchisor or me.

I understand that referees and previous employers may be contacted.

I certify that the above information is true and correct.

Signed _____ Date _____