



Franchise Preliminary Questionnaire

This form is for confidential use by Berlitz. Please complete in as detailed manner as possible. The submission of this form places no obligation on either the candidate or Berlitz Franchising Corporation.

Companies or other legal entities may substitute an annual company report in place of the personal financial data.

Please submit this form to:
Berlitz Franchising Corporation
Denise Jaspers
Hahnstr. 68-70
60528 Frankfurt/Main
Germany
Fax: 0049-69-666 089 222



PLEASE FILL IN WITH CAPITAL LETTERS

Personal Data (if candidate is an individual):

Name: _____ First Name: _____
Address: _____ City: _____
Province/State: _____ Zip Code: _____ Country: _____
Number of years at this address: _____ ID/Passport Number: _____
Date and Place of Birth: _____ Tel. No. private: _____
Office: _____ Mobile: _____
Fax: _____ E-mail Address: _____
Marital Status: _____ Spouse Name: _____

For companies or other legal entities (if that is to be the franchisee)

Name: _____ Established since: _____
Address: _____
City: _____ Province/State: _____ Zip Code: _____
Country: _____ Tel. No.: _____
Fax: _____ E-mail Address: _____
Person who is expected to be the 100% full time director of the center: _____

Education (to be filled out by personal applicants):

List all schools/universities:

School/University	Diploma/Degree	Subjects	Year completed

Business Experience:

From/To	Organization	Position	Annual Salary

Any Comments:

For Organizations:

Business Description	Number of Employees	Annual Revenues

Do you or your organization or you have ownership in any franchise?

Has your organization or have you ever failed in business or compromised with creditors?

If yes, please explain. Are there remaining liabilities?

Are there any lawsuits pending against you or your organization? If yes, please explain

Sources of annual income (in US Dollars)

Salary: _____ Commissions: _____
Bonuses: _____ Dividends: _____
Real Estate Income: _____ Other Income – Specify: _____
Total Annual Income: _____

Assets (USD)

Cash on hand and in banks: _____
Stocks and Bonds: _____
Real Estate owned: _____
Retirement Plans: _____
Other Assets – Specify: _____

Liabilities & Net Worth (USD)

Loans: _____
Credit Card Debt: _____
Mortgages Payable: _____
Other Liabilities: _____

Total Assets: _____

Total Liabilities: _____

Net Worth: _____

Project-related questions:

Territory you are interested in: _____

Please indicate total amount and source of funds you commit to capitalize your business:

Do you have a business plan? _____

Are there any investors/associates who would join you in this venture? If yes, please list

Your timetable for this project? _____

Your professional and personal motivation for becoming a franchisee:

Why do you prefer to be a franchisee rather than a stand-alone school?

What would be the target market in your desired location?

Why do you believe that there is sufficient market to make a profitable business – including the time period for the full return on your investment?

What weaknesses and challenges would you need to deal with in the desired market in order to run a profitable business (security issues, governmental regulations, taxes, teacher employment, etc)?

Would you devote your full time to this business? If not, percentage?

Candidate's Signature: _____ Date: _____

I hereby certify that all information herein contained is true and correct, to the best of my knowledge and understanding.