



## FRANCHISEE APPLICATION

Please return this form promptly along with a current resume. If you are applying for a franchise in partnership with another person, other than spouse, please fill out separate profiles.

**PERSONAL DATA:**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 \_\_\_\_\_ Years at this address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Facsimile #: \_\_\_\_\_  
 \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Drivers License number and state: \_\_\_\_\_  
 Name of Spouse: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_  
 Spouse's Employer: \_\_\_\_\_

HOW DID YOU FIRST LEARN ABOUT CARTRIDGE WORLD? \_\_\_\_\_  
 SUBSEQUENT EXPOSURE(S) TO CARTRIDGE WORLD, IF ANY? \_\_\_\_\_  
 WHAT PROMPTED YOUR INQUIRY? \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

	SCHOOL/LOCATION	MAJOR	DEGREE(S)	YRS. ATTENDED
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
OTHER				

ACADEMIC ACHIEVEMENTS OR ACTIVITIES: \_\_\_\_\_

**BUSINESS EXPERIENCE:** List previous employment beginning with most current or recent.

COMPANY	TYPE OF BUSINESS	POSITION	DATES OF EMPLOYMENT	RESPONSIBILITIES
			to	
			to	
			to	
			to	
			to	

MEMBERSHIP IN ANY CIVIC, SERVICE OR PROFESSIONAL ORGANIZATIONS: \_\_\_\_\_

**FINANCIAL INFORMATION:**

Applicant's Incomes

- Part-Time   Under \$30,000
- Full-Time   \$30 – 50,000
- Not Employed   \$50 – 70,000
- \$70 – 90,000
- OVER \$90,000

Spouse's Income:

- Part-Time   Under \$30,000
- Full-Time   \$30 – 50,000
- Not Employed   \$50 – 70,000
- \$70 – 90,000
- OVER \$90,000

BRIEFLY DESCRIBE YOUR QUALIFICATIONS TO OWN AND MANAGE A CARTRIDGE WORLD FRANCHISE:

WHAT TRAITS AND SKILLS, IN YOUR OPINION, CHARACTERIZE AN EFFICIENT BUSINESS OWNER?

WHY ARE YOU INTERESTED IN RUNNING AND OPERATING A CARTRIDGE WORLD FRANCHISE?

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN TRAFFICE MISDEMEANORS? (IF YES, PLEASE DESCRIBE):

ARE ANY LAWSUITS PENDING AGAINST YOU? (IF YES, PLEASE GIVE PARTICULARS):

HOW WILL YOU FINANCE THE BUSINESS?

WILL YOU HAVE A BUSINESS PARTNER?

IF SO, NAME OF PARTNER AND THEIR RELATIONSHIP TO YOU:

WILL YOU BE RESPONSIBLE FOR THE DAY-TO-DAY OPERATIONS OF THE BUSINESS?

IF NOT, WHO WILL?

ARE YOU INTERESTED IN SINGLE OR MULTIPLE UNIT OPPORTUNITIES?

- Single  Multiple

ARE YOU INTERESTED IN A REGIONAL MASTER FRANCHISE OPPORTUNITY?

- Yes  No

LOCATION PREFERENCES (City or Town):

1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_ 3<sup>rd</sup> Choice: \_\_\_\_\_

WHEN DO YOU ENVISION OPENING YOUR FIRST LOCATION?

Signature \_\_\_\_\_

Date: \_\_\_\_\_