

**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 \_\_\_\_\_

**Layla Al Harmoudi**  
Franchise Manager  
Signature \_\_\_\_\_

**Sulaiman al Hayas**  
Franchise and F&B Manager  
Signature \_\_\_\_\_

Date

Date

Date