



# 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**  
**Hauptstr. 81-85**  
**65760 Eschborn**  
**Germany**  
**Fax: 0049-6196-400 506**



**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:

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**For Organizations:**

Business Description	Number of Employees	Annual Revenues

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

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

If yes, please explain. Are there remaining liabilities?

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

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**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?

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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)?

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

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Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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