

CONFIDENTIAL PROFILE QUESTIONNAIRE

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Name:				Date of Birth:				Marriad	Voo	No
Partner/Spouse:				Date of Birth:				Married: Children:	Yes	No
Address:										
City, State, Zip:										
Telephone - Home:	Cell Phone:									
·				Email:						
Telephone - Work: Email: Education										
School Attended:				Years: Degree:						
School Attended:				Years:				Degree:		
School Attended:				Years:				Degree:		
Employment Employment										
Current Employer:				Number of years:						
Address:					Income:					
City, State, Zip:				Phone Number:						
Position:				Contact at work number?: Yes			Yes	No		
Previous Employer:				Number of ye			of yea	ears:		
Address:				Income:						
City, State, Zip:					Phone Number:					
Position:										
Are you a U.S. Veteran?: Yes No If yes, number of years of service:										
Check the box below that best describes your business model interest and then give your market/city preference below.										
Single Unit	Mu	lti-Unit		Area Developer				International Master		
(1)	(2)		(3)			(4	(4)			
What personal goals would you like to achieve by owning your own business? On a scale from 1-9, please rank each of the personal goals below with "9" being the most important.										
Control of future		Build a business Personal growth				h				
Flixibility of time		F	volvement				Community			
Income level			uild to sell				Be my own boss		-	
How would you rate your following business skills?										
S	ales:			Good Good			Fá	air	Pool	r
Manager	ment:			-		Good		air	Poo	r
Organiza	Organization: Excellent		Very Good		Good	Good		air	Poo	r
Financial: Excellent		Very Good		Good	Good		air	Pool	r	
Marketing: Excellent Ve		Very G	Good Good		d Fa		air	Pool	r	
Customer Service: Excellent Very		Very G	ood	Good		Fá	air	Pool	r	
Have you owned your own business before? Yes No If yes, please explain: How soon would you like to start your business: Immediately 3 to 6 months 7 to 12 months 1 year+										
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Please Check "Yes" or "No" to the attributes that best describe you.									
Amiable	Yes	No	Co	ontrolling	Yes	No	Independent	Yes	No
Outgoing	Yes	No		Flexible	Yes	No	Diplomatic	Yes	No
Persuasive	Yes	No		Leader	Yes	No	Direct	Yes	No
Growth Oriented	Yes	No		Loyal	Yes	No	Reliable	Yes	No
Competitive	Yes	No	Hard	Working	Yes	No	Results Oriented	Yes	No
Money Oriented	Yes	No	R	isk Taker	Yes	No	Open Minded	Yes	No
Intuitive	Yes	No	Cor	nsiderate	Yes	No	Organized	Yes	No
Personal and Business Categories Interests - Check all that apply									
Advertising/Direct Ma	arketing Greer			& Eco Frie	endly		Repair/Res	toration	
Auto	Automotive Hair			/Beauty Sa	lons		Rest	aurants	
Business S	Services		Н	lealth & Fit	ness		Senior S		
Car/Boat	Rentals			Home D	e Decor		Spa & Healthcare		
Child Education/Devel	opment		li	nsurance 8	& Tax		Specialty Retail		
Cleanii	ng/Maid		Manag	jement Trai	aining		Sports		
Coffee/Sm	oothies		Pack	aging & Ma	lailing		Stands/Carts/Vending		
Computer/Tecl	hnology			Pet (Care		Storage		
Dry Cleaning/l	aundry		Р	rint/Copy/S	/Signs		Tanning Salons		
Employment/Pe	rsonnel	Property Maintenance/Repair			Travel				
Financial S	Services	Real Estate			Yogurt/Ice Cream				
Daily roles that I would enjoy, please check your choices.									
Managing Employees High Medium Low									
Sales Pr			ospecting	High	High Medium		Low		
!			Marketing	High Medium		Medium	Low		
N			etworking	High	High Medium		Low		
Custom			er Service	High Medium		Medium	Low		
Providing service quotes and				estimates	9		Medium	Low	
	Expl	ain other in	tereste/hobbies yo	ou have ou	ıtside you	ır work env	vironment:		
*To help you answer the financial questions below, you can use the attached financial worksheet. When saved to your desktop, it will automatically calculate totals for you.									
*Your Net Worth									
Cash Budgeted for Purchase of Business			\$						
Additional Amount You're Willing to Finance			\$						
Income Needed to Maintain Current Lifestyle *Current Total Annual Household Income			\$						
*Current Total Annual Household Income \$ Would this business be your only source of income? Yes No									
If no, please explain:	i Only SOL	irce of incom	ie? Yes No						
Would you characterize your credit as: Great Good OK Bad Credit Score, if known:									
Have you ever been convicted of a felony? Yes No									
If yes, please explain:									
Have you ever declared bar	nkruptcy?	Yes	No						
If yes, please explain:									
Jeel breeze erbien									

Personal Financial Information

(Use dollar amounts only - no decimals, spaces, or commas, then "TAB" to next entry)

	NET	WORTH		
ASSETS	Dollars	LIABILITIES	Dollars	
Stocks/Bonds/Mutual Funds	\$	Credit Card 1 Balance	\$	
Retirement Accounts: IRA	\$	Credit Card 2 Balance	\$	
Retirement Accounts: 401K	\$	Credit Card 3 Balance	\$	
Cash (Checking & Savings)	\$	Notes Payable - Bank	\$	
Accounts/Notes Receivable	\$	Notes Payable - Bank	\$	
Real Estate: Home	\$	Mortgage Balance	\$	
Real Estate:	\$	Mortgage Balance	\$	
Real Estate:	\$	Mortgage Balance	\$	
Automobile 1	\$	Automobile 1 Balance	\$	
Automobile 2	\$	Automobile 2 Balance	\$	
Automobile 3	\$	Automobile 3 Balance	\$	
Business (Value)	\$	Secured Loans	\$	
Other Assets:	\$	Unpaid Real Estate Taxes	\$	
Other Assets:	\$	Unpaid Income Taxes	\$	
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$	
	Net Worth =	\$		

ANNUAL INCOME					
Your Income	\$				
Spouse's Income	\$				
Other Income	\$				
Total Household Income	\$				