



FRANCHISEE QUESTIONNAIRE

~ CONFIDENTIAL ~

QUESTIONNAIRE INSTRUCTIONS

This Questionnaire is *not* a contract nor is it an offer of a Franchise territory.

1. Please read this entire Questionnaire prior to completing it.
2. Respond accurately and candidly to each question.
3. Complete all questions with full answers.
4. Upon Completion please fax the Questionnaire to:

(480) 837-3323
The Academy
Franchise Review Committee

You will be notified of interview date, time, and location if selected for further consideration for a Franchise territory..

All interviews will be held in Fountain Hills, Arizona

For inquires, please contact: Amy Buchman
1-877-837-3389

4) The ability to interact intelligently and effectively with Students, Staff, and business Clients, both verbally and through correspondence, is essential to promoting, developing, and maintaining a successful Academy business. Explain your apropos strong points based on your business experience and successes.

5) What has been your most rewarding accomplishment in business that resulted from dedicated perseverance on your part? Explain in detail.

6) What has been your most rewarding achievement on a personal level that resulted from dedicated perseverance on your part? Explain in detail.

7) List your three most significant accomplishments during your previous business or professional experience? Explain each one in detail.

8) List your single most frustrating experience in your previous business or professional experience. Explain in detail.

9) On a scale of 1 through 10, rate yourself in the following areas: (1 = Poor, 10 = Perfect)

- A. _____ Marketing Abilities
- B. _____ Organizational Skills
- C. _____ Managerial/Supervisory Skills
- D. _____ Communication Skills (oral/written)
- E. _____ Planning
- F. _____ Problem Solving
- G. _____ Time Management Abilities
- H. _____ Interpersonal Skills
- I. _____ Motivational Skills
Self Motivation
Ability to Motivate Others
- J. _____ Computer Literacy
- K. _____ Ability to Learn and Take Direction
- L. _____ Interviewing/Hiring Skills
- M. _____ Human Resources Skills

10) If you were allotted one hundred (100) training hours, designate next to each category how many of these 100 hours you would dedicate to the corresponding category. (Utilize all, but no more than the one hundred hours.)

- A. _____ Marketing Abilities
- B. _____ Organizational Skills
- C. _____ Managerial/Supervisory Skills
- D. _____ Communication Skills (oral/written)
- E. _____ Planning
- F. _____ Problem Solving
- G. _____ Time Management Abilities
- H. _____ Interpersonal Skills
- I. _____ Motivational Skills
Self Motivation
Ability to Motivate Others
- J. _____ Computer Literacy
- K. _____ Ability to Learn and Take Direction
- L. _____ Interviewing/Hiring Skills
- M. _____ Human Resources Skills

11) Is ultimate ownership of your own business something you have planned for? In what time frame?

Yes

No

Time Frame: _____

Why does business ownership appeal to you?

12) Have you been a manager or supervisor in any of your current or past positions?

Yes

No

Explain in detail:

13) Given a franchise territory responsibility to direct, do you believe you have the capability to adequately develop and maintain a Student/Client base?

Yes

Not Sure

No

Explain in detail:

14) What time period do you believe would be necessary to develop a Student/Client base that would adequately achieve your primary financial goals?

Time Frame: _____

Please Explain:

15) What newspapers or periodicals do you read or subscribe to?

16) Outline your short term and long term business goals (include personal financial goals).

Short Term: _____

Long Term: _____

17) Do you believe you would be successful in operating an Academy as a Franchisee?

Yes

Not Sure

No

Please Explain:

18) Why are you interested in operating an Academy as a Franchisee?

19) Despite your best efforts, sometimes Student/Client calls do not always result in positive end results or successful closing. How do you view rejection of this type?

Explain in detail:

20) Do you have any restrictions that would preclude you from accepting fulltime responsibilities to operate an Academy Franchise?

Yes

No

Please Explain:

21) How many hours a week would you be willing to devote to attain your goal in running a successful Academy Franchise?

Please Explain:

How many hours do you estimate would be necessary? _____

22) List in rank order which of the following motivates you most to succeed: (1 = Most, 6 = Least)

Self Satisfaction	_____
Happiness	_____
Personal Income	_____
Career Challenge	_____
Business Success	_____
Profit	_____

23) As a Franchisee of a reputable Franchisor, you would operate under corporate guidelines and policies designed to afford you the greatest chance of success in developing your Franchise's business. Are you able to work comfortably within such guidelines, yet maintain entrepreneurial interest?

Yes

Not Sure

No

Explain in detail:

24) What do you feel are the greatest challenges facing a business with respect to profitability?

Explain in detail:

25) What do you believe is the percentage of priority that businesses give to loss prevention and investigative services?

25% 50% 75% 100% Not Sure

26) What type of business do you believe would benefit by The Academy's services?

27) What percentage of gross sales do you believe companies lose due to internal theft?

25% 50% 75% 90%

Please Explain:

28) Please summarize your views about operating a private postsecondary Academy.

Explain in detail:

29) Have you ever been employed by a Franchisee?

Yes _____ No _____

Explain in detail:

30) Do you intend to have partners if awarded this Franchise?

Yes No

Please identify each partner by name and relationship.

Name Relationship

31) Do you intend to borrow funds to help you purchase or develop this Franchise?

Yes _____ No _____

If yes, \$ _____ Amount

Source of Funds:

32) Does your family support your decision to initiate this Franchise?

Completely
Somewhat
Not At All

Explain in detail:

33) In the past ten years, have you filed for personal bankruptcy?

Yes

No

Year Discharged _____

Explain in detail:

34) In the past ten years, has a business you have had any ownership interest in filed for bankruptcy protection?

Yes

No

Year Discharged _____

Explain in detail:

35) Why do you believe you are qualified to be a Franchisee in the Academy's Franchise system?

Explain in detail:

36) What qualities and characteristics will you look for in the Franchisor?

Explain in Detail:

Please list any questions you have pertaining to this opportunity.

37) Have you ever been convicted of a criminal offense?

Yes

No

Explain in detail:

38) As part of our screening process, are you willing to submit to a complete background investigation to include criminal history, social security verification, credit check, employment review, personal references contact, and drug screening?

Yes

No

39) Have you ever owned a Franchise?

Yes

No

Please explain the circumstances of that ownership:

Date: _____ Signature: _____

Successful candidates must meet State Licensing Guidelines to operate a private postsecondary instructional institution, where applicable. This Questionnaire will be used to determine the applicant's eligibility and suitability for further consideration in the interview process. All Questionnaires will be held in strict confidence and are the exclusive property of The Academy.

Education:

High School: _____
Address: _____
City/State: _____

Highest Grade Completed: 10 11 12

College: _____
Address: _____
City/State: _____

Highest Grade Completed: 13 14 15 16

Degree Certificate: Yes No Degree: _____

Graduate School: _____
Address: _____
City/State: _____

Credits Earned: _____

Degree Certificate: Yes No Degree: _____

Employment:

Current Employer: _____
Street Address: _____
Suite #: _____
City/State: _____
Zip: _____

Position: _____

Presently Employed: Yes No

Date of Employment: From: _____ To: _____

Previous Employer: _____
Street Address: _____
Suite #: _____
City/State: _____
Zip: _____

Position: _____

Presently Employed: Yes No

Date of Employment: From: _____ To: _____

Reason for Leaving: _____

Previous Employer: _____
Street Address: _____
Suite #: _____
City/State: _____
Zip: _____

Position: _____

Presently Employed: Yes No

Date of Employment: From: _____ To: _____

Reason for Leaving: _____

Previous Employer: _____
Street Address: _____
Suite #: _____
City/State: _____
Zip: _____

Position: _____

Presently Employed: Yes No

Date of Employment: From: _____ To: _____

Reason for Leaving: _____

Do you have experience in Education? Yes No

Explain in detail:

Do you have experience in Law Enforcement? Yes No

Explain in detail:

Do you have experience in Loss Prevention/Security? Yes No

Explain in detail:

Do you have experience in Human Resources? Yes No

Explain in detail:

Do You Have An Interest In Establishing Multiple Academy Units Within Each Territory?

Yes

Not Sure

No

Explain in detail:

~ END OF QUESTIONNAIRE ~