



Signarama™

The way to grow your business.

**ASIA
HEADQUARTERS**

Signarama Asia Pte. Ltd.
No. 7 Kaki Bukit Road 1 #01-09
Eunos Technolink
Singapore 415937

TEL +65 6749-1107
(Asia only)

FAX +65 6749-7366

www.signarama-sea.com / <http://franchise.signarama-sea.com>

email: franchise@signarama.com.sg

PERSONAL PROFILE

The information you furnish in this form is not binding and in no way obligates you or Signarama to purchase or sell a franchise. Its purpose is to provide our company with the pertinent information needed to evaluate you as an applicant. The company will hold the answers supplied in this application in strict confidence. The information and references provided herein will not be verified without your written and/or oral authorization.

PLEASE PRINT CLEARLY

I. PERSONAL DATA

NAME: _____ SPOUSE: _____
FIRST MIDDLE LAST FIRST MIDDLE LAST

ADDRESS: _____
STREET ADDRESS

CITY _____ STATE _____ ZIP/POSTAL CODE _____ COUNTRY _____

HOME PHONE: _____ Best Time Morning Afternoon Evening
 BUSINESS PHONE: _____ Best Time Morning Afternoon Evening

CELL PHONE: _____ E-MAIL ADDRESS: _____

PERSONAL CONFIDENTIAL INFORMATION

DATE OF BIRTH: _____

SPOUSE DATE OF BIRTH: _____

HAVE YOU EVER FILED FOR BANKRUPTCY? Yes No

IF YES, WHEN? _____

MARITAL STATUS: SINGLE MARRIED

DIVORCED

DO YOU RENT OR OWN YOUR HOME? _____

MONTHLY PAYMENT? _____

HOW LONG HAVE YOU LIVED AT THIS ADDRESS? _____

CITIZENSHIP: _____

DEPENDENTS:

NAME _____ AGE _____

NAME _____ AGE _____

NAME _____ AGE _____

NAME _____ AGE _____

II. BUSINESS BACKGROUND

INFORMATION ABOUT YOU

PRESENT EMPLOYER: _____

BUSINESS ADDRESS: _____

TITLE: _____

RESPONSIBILITIES:

LENGTH OF EMPLOYMENT: _____

ANNUAL SALARY: _____

WILL YOU BE LEAVING THIS EMPLOYEMENT TO OPEN YOUR BUSINESS: YES NO

ANY OTHER SOURCE OF INCOME : _____

INFORMATION ABOUT YOUR SPOUSE

PRESENT EMPLOYER: _____

BUSINESS ADDRESS: _____

TITLE: _____

RESPONSIBILITIES:

LENGTH OF EMPLOYMENT: _____

ANNUAL SALARY: _____

TOTAL COMBINED ANNUAL INCOME : _____

III. PREVIOUS EMPLOYMENT:

NAME OF EMPLOYER	ADDRESS	CITY	STATE/PROVINCE	YEARS EMPLOYED	POSITION
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HAVE YOU AT ANY TIME OWNED OR OPERATED YOUR OWN BUSINESS? (EXPLAIN BELOW) YES NO

TYPE OF BUSINESS: _____

HOW LONG OPERATED: _____

FULL PART TIME ANNUAL INCOME: _____

SOLD/CLOSED/STILL OWN _____

IV. ABOUT YOU

HOW DID YOU BECOME INTERESTED IN SIGNARAMA? _____

WHAT ARE YOUR PRIMARY REASONS FOR GOING INTO YOUR OWN BUSINESS?

(1) _____ (2) _____ (3) _____

WHAT ARE YOUR PRIMARY CONCERNS WITH OWNING YOUR OWN BUSINESS?

IDEALLY, WHEN WOULD YOU WANT TO OPEN YOUR FRANCHISE? ASAP WITHIN 3 MONTHS WITHIN 6 MONTHS
 WITHIN 12 MONTHS OTHER

IN WHICH GEOGRAPHICAL AREA WOULD YOU LIKE TO OPEN YOUR FRANCHISE?

(1) _____ (2) _____ (3) _____

DO YOU PLAN TO HAVE A PARTNER? YES NO IF SO, WILL PARTNER BE ACTIVE? YES NO

PARTNER'S NAME 1) _____ PHONE #: _____

ARE YOU INTERESTED IN OBTAINING A MASTER LICENSE? YES NO IF SO, WHAT COUNTRY? _____

WILL ANY FAMILY MEMBERS BE INVOLVED IN THE BUSINESS? YES NO

IF SO, WHO?: NAME _____ RELATIONSHIP _____
NAME _____ RELATIONSHIP _____

WHAT LANGUAGES DO YOU SPEAK? _____

HAVE YOU EVER MANAGED EMPLOYEES? YES NO

IF SO, HOW MANY AND IN WHAT CAPACITY? _____

MY COMPUTER EXPERIENCE IS: (CIRCLE ONE) NONE CASUAL AVERAGE ABOVE AVERAGE

MY SPOUSE'S COMPUTER EXPERIENCE IS: (CIRCLE ONE) NONE CASUAL AVERAGE ABOVE AVERAGE

RATE YOUR FINANCIAL MANAGEMENT SKILLS: (CIRCLE ONE) POOR CASUAL AVERAGE EXCEPTIONAL

RATE YOUR SPOUSE'S FINANCIAL MANAGEMENT SKILLS: (CIRCLE ONE) POOR CASUAL AVERAGE EXCEPTIONAL

A SIGNARAMA 3 HAS MAIN COMPONENTS: SALES, MANAGEMENT AND PRODUCTION:

WHICH ONE COMPONENT DO YOU FEEL MOST COMFTORABLE WITH? _____

WHICH ONE COMPONENT DOES YOUR SPOUSE FEEL MOST COMFTORABLE WITH? _____

CURRENT AFFILIATIONS: (FRATERNAL, BUSINESS, PROFESSIONAL, CIVIC, ETC.):

ANY OTHER INFORMATION YOU WANT TO PROVIDE:

V. FINANCIAL INFORMATION

ASSETS

CASH ON HAND & IN BANKS: _____

STOCKS, BONDS, SECURITIES: _____

RETIREMENT FUNDS: _____

LOANS OWED TO YOU:
(DUE W/IN 1 YR.) _____

REAL ESTATE: (PRESENT VALUE) _____

BUSINESSES OWNED: _____

ANY OTHER ASSETS: _____

LIABILITIES

NOTES PAYABLE TO BANKS : _____

NOTES PAYABLE TO INDIVIDUALS : _____

TOTAL CREDIT CARD DEBT: _____

VEHICLE LOANS: _____

HOME MORTGAGE : _____

OTHER MORTGAGES: _____

STUDENT LOANS: _____

ANY OTHER DEBTS: _____

NET WORTH:

TOTAL ASSETS: _____

TOTAL LIABILITIES: _____

SUBTRACT FOR NET WORTH _____

AMOUNT OF CAPITAL TO INVEST: _____ **SOURCE OF CAPITAL** _____

THIS IS NOT A CONTRACTUAL AGREEMENT. THE SIGNING OF THIS DOCUMENT DOES NOT OBLIGATE YOU IN ANY WAY TO PURCHASE A SIGNARAMA. THE UNDERSIGNED CERTIFIES THAT THE INFORMATION SUPPLIED IS TRUE AND CORRECT.

SIGNATURE: _____

DATE: _____

SPOUSE'S/ PARTNER'S SIGNATURE: _____

DATE: _____

SIGNARAMA Asia Pte. Ltd.

Please return this completed profile to franchise@signarama.com.sg or by fax to +65 6749-7366.

Thank you and we look forward to speaking with you soon.