



Academy Franchise Partnership, Inc.

**REGIONAL DEVELOPER  
FRANCHISEE  
CANDIDATE QUESTIONNAIRE**

***~ CONFIDENTIAL ~***

Name: \_\_\_\_\_

Regional Developer Candidate ( )

Franchisee Candidate ( )

## QUESTIONNAIRE INSTRUCTIONS

This Questionnaire is *not* a contract nor is it an offer of a Region or a Franchise territory. It is designed to provide information about each Candidate for a Regional Developer or Franchisee position in this franchise. All information is considered confidential. No information of a personal nature is requested, nor is financial information requested. Please do *not* supply such information in completing this Questionnaire or attach it hereto.

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. Submit the Questionnaire to:

**Academy Franchise Partnership, Inc.**  
Candidate Review Committee  
Post Office Box 50266  
Phoenix, Arizona 85076

Do not fold this Questionnaire for mailing.

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

All interviews will be held in the Phoenix, Arizona area. Each Candidate is solely responsible for their own expenses, including travel, meals, and lodging.

For inquiries, please contact: Beau W. Bock  
602-799-0950

# REGIONAL DEVELOPER/FRANCHISEE CANDIDATE QUESTIONNAIRE

[Please Do Not Write "See Resume" For Any Response]

**Please Print Neatly:** Full Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Cellular Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Fax Number: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

- 1) As a Franchisee responsible for marketing, developing a territory, and managing an Academy centered upon the investigative field, how much time and effort do you feel should be devoted daily to achieve established goals?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 2) Do you possess organizational skills enabling you to exercise proper Academy management, control, and monitoring?

\_\_\_\_\_ Limited      \_\_\_\_\_ Moderate      \_\_\_\_\_ Extensive

Please Explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3) Do you have the experience and ability to operate effectively and independently, initiate sales and marketing calls, and conduct meetings and presentations with prospective, current, and former Students, Seminar Attendees, and Clients?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Please Explain:

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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 interaction points based on your business experience and successes.

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

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

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

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

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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 that you have planned for?  
In what time frame?

\_\_\_\_\_ Yes      \_\_\_\_\_ No      Time Frame: \_\_\_\_\_

Why does business ownership appeal to you?

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

\_\_\_\_\_ Yes          \_\_\_\_\_ No

Explain in Detail:

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

\_\_\_\_\_ Yes          \_\_\_\_\_ Not Sure          \_\_\_\_\_ No

Explain in Detail:

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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:

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

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

Short Term: \_\_\_\_\_

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Long Term: \_\_\_\_\_

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

\_\_\_\_\_ Yes                  \_\_\_\_\_ Not Sure                  \_\_\_\_\_ No

Please Explain:

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

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

Explain in Detail:

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

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Please Explain:

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

How many hours do you estimate would be necessary? \_\_\_\_\_

Please Explain:

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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:

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

Explain in Detail:

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25) Do you speak a second language? \_\_\_\_\_ Yes      \_\_\_\_\_ No

If yes, which second language: \_\_\_\_\_

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

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27) Why do you want an instructional institution Franchise?

Please Explain:

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

Explain in Detail:

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29) Have you ever been employed by a Franchisee?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Explain in Detail:

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

\_\_\_\_\_ Yes \_\_\_\_\_ No

Please identify each partner by name and relationship.

Name

Relationship

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

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, \$\_\_\_\_\_ Amount

Source of funds: \_\_\_\_\_

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

\_\_\_\_\_ Completely \_\_\_\_\_ Somewhat \_\_\_\_\_ Not At All

Explain in Detail:

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

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Year Discharged

Explain in Detail:

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

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Chapter \_\_\_\_\_ Year Discharged

Explain in Detail:

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

Explain in Detail:

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

Explain in Detail:

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Please list any questions you have pertaining to this opportunity.

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

\_\_\_\_\_ Yes          \_\_\_\_\_ No

Explain in Detail:

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38) As part of our screening process, are you willing to submit to a complete background investigation to include criminal history, social security number 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.

Explain in Detail:

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\_\_\_\_\_

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 Candidate's qualifications, eligibility, and suitability for further consideration in the interview process. All Questionnaires will be held in strict confidence and are the exclusive property of Academy Franchise Partnership, Inc.

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## BACKGROUND INFORMATION

### Education:

High School: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Highest Grade Completed: 10 11 12

College: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Highest Grade Completed: 13 14 15 16

Degree Conferred: Yes \_\_\_\_\_ No \_\_\_\_\_ Degree: \_\_\_\_\_

Graduate School: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Credits Earned: \_\_\_\_\_

Degree Conferred: Yes \_\_\_\_\_ No \_\_\_\_\_ Degree: \_\_\_\_\_

### Employment:

Current Employer: \_\_\_\_\_  
Firm or Company

\_\_\_\_\_  
Street Address Suite #

\_\_\_\_\_  
City/State Zip code

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Position

Presently Employed: Yes \_\_\_\_\_ No \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Firm or Company

Street Address

Suite #

City/State

Zip code

Position

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Firm or Company

Street Address

Suite #

City/State

Zip code

Position

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Previous Employer: \_\_\_\_\_  
Firm or Company

\_\_\_\_\_  
Street Address Suite #

\_\_\_\_\_  
City/State Zip code

\_\_\_\_\_  
Position

Dates 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:

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Do you have experience in Human Resources? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain in Detail:

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Do you have experience in Business Ownership? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain in Detail:

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Do you have experience as a Franchisee? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain in Detail:

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What Is Your Approximate Availability of Liquid Assets?

\$ \_\_\_\_\_

Is this Readily Verifiable? \_\_\_\_\_ Yes \_\_\_\_\_ No

Of *Available* Counties To Be Franchised As Exclusive Territories, List Those You Would Be Interested In Establishing Academies In At This Time:

- |                          |                           |
|--------------------------|---------------------------|
| 1. _____<br>County/State | 6. _____<br>County/State  |
| 2. _____<br>County/State | 7. _____<br>County/State  |
| 3. _____<br>County/State | 8. _____<br>County/State  |
| 4. _____<br>County/State | 9. _____<br>County/State  |
| 5. _____<br>County/State | 10. _____<br>County/State |

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

\_\_\_\_\_ Yes      \_\_\_\_\_ Not Sure      \_\_\_\_\_ No

Explain in Detail:

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If you are a Candidate for a Regional Developer position, in which available Region are you interested?

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**~ END OF QUESTIONNAIRE ~**

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