

What 3 things are you expecting from owning your own business / Franchise?

1 _____
2 _____
3 _____

How will you know when you have found the right business?

Financial information

Investment level £ _____
I would like to earn per year? £ _____
In the first year I'd be happy with? £ _____
Value of home – if owned £ _____
Amount of cash available £ _____
Amount of other available savings £ _____

Monies Owed

Mortgage £ _____
Bank(s) £ _____
Car £ _____
Lease and/or other £ _____
Financial Institutions £ _____
Others (state) £ _____

Business Plan

During the application process Thorntons will require a Business Plan as part of the Application.

Agreement and Submission

All of the information stated herein is a true and correct representation of my personal and financial condition. By submitting this application I authorise Thorntons plc to take references from any previous employer or business supplied. I understand that if Thorntons discovers that the information given by me is incorrect, it may withdraw any subsequent offer of a franchise without having to make any payment of compensation to me or it may immediately terminate my appointment as a franchisee should the matter be discovered after my appointment. It is understood that the purpose of this questionnaire is to complete general information and that it is in no way binding upon either Thorntons or the Franchise candidate. This is not a contract.

Credit Check

We will make periodic searches with a credit reference agency, which will keep a record of that search and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency.

Data Protection Notice:

The information provided by the applicant will be used for the sole purpose of evaluating the suitability of the applicant for becoming a Thorntons Franchisee by Thorntons plc. Details relating to unsuccessful applicants will be destroyed within 4 months of the application being made. Details of successful applications will be kept secure for the tenure of their Franchise Agreement. By submitting this application form I consent to the processing of any personal data and sensitive personal data contained in this application. Any data protection queries should be submitted in writing to the Company Secretary, Thorntons plc at the address stated below.

Please tick the box if you do not wish to receive mailings from Thorntons related businesses mentioned in this pack.

Completion of this form is no guarantee that a Thorntons Franchise will be awarded to the applicant.

Thorntons PLC, Thornton Park, Somercotes, Alfreton, Derbyshire, DE55 4XJ.

Signed _____
Name (printed) _____
Date _____



Franchise Application Form

Name _____ Mr, Mrs, Miss _____

Address _____

Town _____

County _____ Postcode _____

Day Time Phone _____

Evening / Weekend Phone _____

Mobile _____

Fax _____ Email address _____

The best time to call me is _____

The best number to call me on is _____

Will you have a partner involved in the business?

If so, who? _____

Past Employment Information

Current or most recent employer or business _____

Most recent annual income _____

Most recent role _____

Responsibilities

What do you like most about your past jobs or businesses?

What do you like least about your past jobs or businesses?

What do you consider your greatest achievement?

On the basis of your past experience, your strengths / best skills are

1
2
3

... and your weaknesses are

1
2
3

How would you rate your sales ability?

What professional affiliations and hobbies do you have?

Professional

Hobbies

How long have you been looking for a Franchise?

What kind of Businesses / Franchises have you looked at?

Have you ever had a business failure / Bankruptcy

Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974?

Please tick 5 statements that best describe you and what you are looking for:

- I look forward in working together
- I like managing people
- I like working hard
- I like taking risks
- I am computer literate
- I am happy working to tight deadlines
- I want a management opportunity
- I want to work 9-5 only
- I like driving
- Weekend work is OK
- I am good at marketing
- I am good at selling
- My family support me
- I enjoy meeting new people

When do you want to start your new business?

Where?

Are you willing to move?

Would you be involved on a part time or full time basis?

How many days will you devote per week?

Would friends or family be involved in your business? - If yes, who?

About you!

Attitude and values

Please select 15 words or phrases that best describe you and tick the ones selected

- | | | |
|--|--|---|
| <input type="checkbox"/> Accurate | <input type="checkbox"/> Flexible | <input type="checkbox"/> Popular |
| <input type="checkbox"/> Adventurous | <input type="checkbox"/> Focussed | <input type="checkbox"/> Precise |
| <input type="checkbox"/> Ambitious | <input type="checkbox"/> Friendly | <input type="checkbox"/> Problem solver |
| <input type="checkbox"/> Amicable | <input type="checkbox"/> Good listener | <input type="checkbox"/> Relaxed |
| <input type="checkbox"/> Analytical | <input type="checkbox"/> Growth orientated | <input type="checkbox"/> Reliable |
| <input type="checkbox"/> Charming | <input type="checkbox"/> Hard working | <input type="checkbox"/> Results driven |
| <input type="checkbox"/> Competitive | <input type="checkbox"/> High standards | <input type="checkbox"/> Risk taker |
| <input type="checkbox"/> Conscientious | <input type="checkbox"/> Impatient | <input type="checkbox"/> Self starter |
| <input type="checkbox"/> Confident | <input type="checkbox"/> Innovative | <input type="checkbox"/> Service orientated |
| <input type="checkbox"/> Conservative | <input type="checkbox"/> Inspiring | <input type="checkbox"/> Sincere |
| <input type="checkbox"/> Considerate | <input type="checkbox"/> Leader | <input type="checkbox"/> Sociable |
| <input type="checkbox"/> Controlling | <input type="checkbox"/> Mature | <input type="checkbox"/> Stable |
| <input type="checkbox"/> Convincing | <input type="checkbox"/> Money orientated | <input type="checkbox"/> Supportive |
| <input type="checkbox"/> Courteous | <input type="checkbox"/> Motivated | <input type="checkbox"/> Team player |
| <input type="checkbox"/> Daring | <input type="checkbox"/> Open minded | <input type="checkbox"/> Thinker |
| <input type="checkbox"/> Decisive | <input type="checkbox"/> Optimistic | <input type="checkbox"/> Traditional |
| <input type="checkbox"/> Diplomatic | <input type="checkbox"/> Outgoing | <input type="checkbox"/> Trusting |
| <input type="checkbox"/> Direct | <input type="checkbox"/> Patient | <input type="checkbox"/> Understanding |
| <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Persistent | <input type="checkbox"/> Unique |
| <input type="checkbox"/> Fact finder | <input type="checkbox"/> Persuasive | |

Please rank 10 of the following things that are most important to you on a scale of 1-10 (1 being most important, 10 being least important)

- | | | | |
|---|---------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Integrity | <input type="checkbox"/> Success | <input type="checkbox"/> Fun | <input type="checkbox"/> Challenge |
| <input type="checkbox"/> Accomplishment | <input type="checkbox"/> Independence | <input type="checkbox"/> Growth | <input type="checkbox"/> Control |
| <input type="checkbox"/> Freedom | <input type="checkbox"/> Prestige | <input type="checkbox"/> Recognition | <input type="checkbox"/> Health |
| <input type="checkbox"/> Family | <input type="checkbox"/> Fulfilment | <input type="checkbox"/> Money | <input type="checkbox"/> Relationships |
| <input type="checkbox"/> Contribution | <input type="checkbox"/> Creativity | <input type="checkbox"/> Security | <input type="checkbox"/> Flexibility |
| <input type="checkbox"/> Results | <input type="checkbox"/> Competition | <input type="checkbox"/> Happiness | <input type="checkbox"/> Honesty |