



Smoothies With A Purpose: CANDIDATE APPLICATION

GENERAL INFO			
APPLICANT		CO-APPLICANT	
Applicant's Full Name:		Co-Applicant Name & Relationship to Applicant:	
Date of Birth:	Married <input type="checkbox"/> Unmarried <input type="checkbox"/>	Date of Birth:	Married <input type="checkbox"/> Unmarried <input type="checkbox"/>
# of Dependents: ___ Ages: _____		# of Dependents: ___ Ages: _____	
Phone:	Cell:	Phone:	Cell:
Email:	Social Security #:	Email:	Social Security #:
Home Address: Own <input type="checkbox"/> Rent <input type="checkbox"/> Length of Time _____		Home Address: Own <input type="checkbox"/> Rent <input type="checkbox"/> Length of Time _____	
US Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/>		US Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/>	

EMPLOYMENT			
Are you: Self Employed <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/>		Are you: Self Employed <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/>	
Name of Employer/Company	Years at this Company	Name of Employer/Company	Years at this Company
Position/Title/Type of Business		Position/Title/Type of Business	
If Self-Employed: Annual Sales _____ # of Employees _____		If Self-Employed: Annual Sales _____ # of Employees _____	

INCOME			
Annual Income	Applicant	Co-Applicant	Total
Base Employment Income			
Overtime/Bonuses/Commissions			
Dividends/Interest			
Rental Income			
Other-Describe			
TOTAL			

PERSONAL INFORMATION	Applicant		Co-Applicant	
	Yes	No	Yes	No
Have you ever filed for Bankruptcy protection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a felony?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been associated directly or indirectly with terrorist activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you had property foreclosed upon or given title or deed in lieu there of in the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER INFORMATION	
I have enough income to maintain my current lifestyle without spending funds allocated for development of my Smoothie King Franchise until opening	Yes <input type="checkbox"/> No <input type="checkbox"/>
I understand that if financing is needed to open my Franchise, it is my sole responsibility to obtain the financing	Yes <input type="checkbox"/> No <input type="checkbox"/>

I/We acknowledge that the information provided on this page is true and correct. (Please initial) _____/_____

FINANCIAL WORKSHEET

This worksheet and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Applicants if their assets and liabilities are sufficiently joined so that the worksheet can be meaningfully and fairly presented on a combined basis; otherwise a separate worksheet is required.

Completed: Jointly Individual

ASSETS	Cash or Market Value	LIABILITIES		
List cash accounts: (checking/savings/stocks)	Balance	List of liabilities owed: (i.e. credit card/auto loan/home mortgage)	Monthly Payment	Unpaid Balance
Type:		Type:		
Type:		Type:		
Type:		Type:		
TOTAL CASH AVAILABLE		Type:		
Real Estate Value		Type:		
Vested Interest in Retirement Funds		Type:		
Net Worth of Business (include financial statement)		Type:		
Other Assets - Describe		If additional liabilities apply, please list on separate sheet		
(A) TOTAL ASSETS		(B) TOTAL LIABILITIES		
NET WORTH (A) - (B) :				

ATTACHMENTS TO INCLUDE

Please attach to this application:

- * Bank Statements to support Liquidity of \$100,000
- * If more than one property is owned please include a schedule
- * Resume
- * For all assets please include supporting documents
- * If prior Military - Honorable Discharge Paperwork DD-214

SIGNATURES

Smoothie King's acceptance of this application should not be taken as a grant of a franchise. All franchises are granted ONLY by the execution of a written Franchise Agreement. By signing below, I authorize Smoothie King Franchises, Inc. to start an investigative consumer report (including any information as to my character, general reputation, personal characteristics and mode of living) and a credit investigation based on the information voluntarily provided by me and warrant that all information provided is true and accurate. I understand that I have the right to request that Smoothie King make a complete and accurate disclosure of the nature and scope of such investigations. Smoothie King may obtain my credit report in connection with this application. This is my authorization to credit reporting agencies, banks, creditors and suppliers to release to Smoothie King Franchises, Inc. all information requested regarding my depository, loan or any other credit information or financial information without limitation, either by telephone, email or in writing, as part of a normal credit evaluation. I release my bank(s), creditors, suppliers and Smoothie King Franchises, Inc. from all liability with respect to the release of such requested information. Authorization is granted to use photocopies, fax copies or emailed copies of my signature to obtain information. If I am requesting that Smoothie King Franchises, Inc. make a credit determination based on my creditworthiness combined with any co-applicant, I authorize Smoothie King Franchises, Inc. to discuss any derogatory credit items with such co-applicants. I understand that at any time, Smoothie King Franchises, Inc. may require that I sign an updated application or provide updated information. I acknowledge that I have read and hereby agree to the terms of this contract with strict confidentiality regarding its contents.

APPLICANT'S SIGNATURE

DATE

CO-APPLICANT'S SIGNATURE

DATE