



FRANCHISE APPLICATION



This form, when completed, is an essential part of evaluating your qualifications to be awarded a Premiere Executive Suites franchise. Please make certain that the information you provide is legible give specific answers to each of the questions. All off the information you provide will be held in strict confidence. The completion of this form does not obligate Premiere Executive Suites or its affiliates or you in any way or manner. (To be completed by each proposed partner/shareholder/member of the franchise group.)

Personal Data:

Name: _____
Last first Middle name or Initial

Address: _____
Number Street City Province Postal Code

Number of Dependents: _____ Ages: _____

Educational History:

Level Completed	Name of Institution	Address <i>Number, Street, City, Province, PC</i>	Phone Number
Elementary			
Middle School			
University			
Post Secondary			

Business Experience: (Attach a copy of your resume if available) Please give present or last position first, and provide the last 5 years of work/business history - attach an additional sheet if necessary.

1. Company	Employment Dates <i>(from D/M/Y to D/M/Y)</i>	Address <i>Number, Street, City, Province, PC</i>	Title

Major Accomplishments:

2. Company	Employment Dates <i>(from D/M/Y to D/M/Y)</i>	Address <i>Number, Street, City, Province, PC</i>	Title

Major Accomplishments:



Location Preference: City _____ Province _____ Other _____

PERSONAL REFERENCES

Name, Telephone Number and Association

- 1. _____
- 2. _____
- 3. _____

How did you become aware of the Premiere Executive Suites franchise opportunity?

Why are you interested in the Premiere Executive Suites franchise opportunity?

BANKING REFERENCES

Banking / Chequeing Account

Bank Name _____
Street Address: _____
City & Province: _____
Contact Name: _____
Phone Number with Extension: _____
Account Number: _____

Banking / Savings Account

Street Address: _____
City & Province: _____
Contact Name: _____
Phone Number with Extension: _____
Account Number: _____

Banking / Other Account

Street Address: _____
City & Province: _____
Contact Name: _____
Phone Number with Extension: _____
Account Number: _____

I authorize Premiere Executive Suites and its affiliates to make investigations of my credit, character and ability, and to contact anybody, whether or not listed above, including former

Confidential Application



employers, in order to obtain credit, character and personal information about me. I authorize all parties contacted by or on behalf of Premiere Executive Suites or its affiliates behalf to release this credit, character or personal information. I authorize Premiere Executive Suites and its affiliates to use such credit, character or personal information for the purposes of evaluating my application for a Premiere Executive Suites franchise and any other related purposes which they may consider relevant or appropriate. I also certify that all the information in this application is true and complete.

Signature:

Date:

___/___/___



Authorization

For Release of Personal Data Record Information

In connection with my Application for a franchise with Premiere Executive Suites, I hereby authorize Premiere Executive Suites or its affiliates, to contact any present or past employer, school, financial institution, law enforcement agency, reference or any other person, firm or corporation.

I authorize and request any of the firms or persons contacted to provide all information concerning me, and I hereby release said firms, institutions and their agents and employees from all liability and responsibility from releasing this information. I understand such reports may contain information concerning my school work, my work habits, character or skill, credit history or criminal history. Premiere Executive Suites Canada and its affiliates agree to restrict the use of this information only to the evaluation of my Application for a Premiere Executive Suites franchise.

I am willing and request that a photocopy of this Authorization be accepted with the same authority as the original.

I further authorize Premiere Executive Suites Canada or its affiliates, to release to prospective financial sources such financial and other information concerning me in their files as may be requested.

Print Name: _____

Place of Birth: _____

Drivers License
Number and Province: _____

Signature: _____

Date: ____/____/____