



Request for Consideration

The purpose of this Request for Consideration is for general information in evaluating your initial qualifications to be awarded an East of Chicago Pizza CompanySM franchise license. This form, when completed, is an essential part of our selection process. Please complete this form personally; printing or typing your responses and giving specific answers to all questions. All answers are held in confidence. This form is not to be construed as an offer of an East of Chicago Pizza CompanySM franchise, a commitment or a binding agreement on either party. This form is to be completed by each proposed partner if a partnership or group.

PLEASE PRINT OR TYPE

PERSONAL DATA:

Name: _____ Social Security Number: _____ \ _____ \ _____
Driver's License Number: _____

Mailing Address or P.O. Box: _____

Residence Street Address (if different from mailing address): _____

City: _____ State: _____ Postal Zip Code: _____

Residential Telephone Number: _____ Residential Fax Number: _____

Work Telephone Number: _____ Work Fax Number: _____

Best time to call: _____ Email Address: _____

Have you ever been convicted of a felony or misdemeanor? _____ If yes, please explain: _____

Date of Birth: _____ Marital Status: _____ Spouse Name: _____

(If spouse is to be active in the franchise, a separate Request for Consideration form must be completed.)

Number of Dependents: _____ Ages: _____

PRE-QUALIFICATION DATA:

1. How did you become aware of the franchising opportunities available from East of Chicago Pizza CompanySM? _____

2. What prompted your inquiry? _____

3. Do you have access to a minimum of \$50,000.00 liquid assets to begin financing this franchise venture? Yes _____ No _____

4. Have you made a decision to be self-employed or are you ready to make a decision to invest in another business? Yes _____ No _____

5. Assuming your review of East of Chicago Pizza CompanySM is positive, are you prepared to make a decision about the franchise opportunity within 60-120 days? Yes _____ No _____

6. In what area would you like to locate an East of Chicago Pizza CompanySM franchise? _____

7. Are you willing to consider other locations? Yes _____ No _____

8. Will your spouse or other partners be involved in the business? Yes _____ No _____

(If yes, a separate Request for Consideration form must be completed by each.)

9. Have you ever pursued or been involved in a franchise opportunity? Yes _____ No _____

10. Do you understand how franchising operates? Yes _____ No _____

11. Are you involved, or have you been involved in a business that may restrict you from franchising with East of Chicago Pizza CompanySM? Yes _____ No _____

BUSINESS EXPERIENCE:

Work history and/or business started - Please attach resume if available.

Please give present or most recent position first, and provide the last 10 years of work/business history. Attach an additional sheet if necessary.

Company _____ City _____ State _____

Type of Business _____ Position _____

Employed from _____ to _____

Major Accomplishments _____

May we contact this company? _____ Contact Person _____ Telephone Number _____

Company _____ City _____ State _____

Type of Business _____ Position _____

Employed from _____ to _____

Major Accomplishments _____

May we contact this company? _____ Contact Person _____ Telephone Number _____

Company _____ City _____ State _____

Type of Business _____ Position _____

Employed from _____ to _____

Major Accomplishments _____

May we contact this company? _____ Contact Person _____ Telephone Number _____

Other business affiliations (Officer, Director, Partner, etc.) _____

Have you ever failed in business or filed for bankruptcy? Yes _____ No _____

If yes, please explain: _____

Business and Management Goals:

Do you plan to devote full time to this business venture? Yes _____ No _____

Do you plan to have equity partners? Yes _____ No _____

If yes, please identify all partners:

Names	Address	Telephone Number	Active in Franchise

All partners will need to submit separate Request for Consideration Forms, in addition to being listed here.

EDUCATION EXPERIENCE:

	Institution Name	Location	Dates Attended	Major/Degree
High School				
College				
Graduate				
Post Graduate				
Other				

PERSONAL REFERENCES:

(minimum 3 non-family related required)

Name	Telephone Number	Association

FINANCIAL INFORMATION:

ASSETS:	Amount
Cash on hand and in banks	\$
(See schedule #1 on next page)	Total of schedule #1
Stocks and Bonds	\$
(See schedule #2 on next page)	Total of schedule #2
Accounts Receivable	\$
(See schedule #3 on next page)	Total of schedule #3
Real Estate Investments	\$
(See schedule #4 on next page)	Total of schedule #4
Net Value of Business	\$
(Enclose most recent financial statement)	
Life Insurance (Cash Value*)	\$
Other Assets (Itemize)	\$
	\$
	\$
TOTAL ASSETS	\$

LIABILITIES:	Amount
Loans, Notes and Mortgage Payable	\$
(See schedule #5 on next page)	Total of schedule #5
Accounts and Bills Due	\$
(Monthly utilities, etc.)	
Taxes Due	\$
Credit Card Debt	\$
(See schedule #6 on next page)	Total of schedule #6
Other Liabilities (Itemize)	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL LIABILITIES	\$

*Indicates true cash value, not face value.

TOTAL NET WORTH (Total Assets Less Total Liabilities)	\$
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	Amount
Capital available to invest in this franchise	\$
Residence - Own ____ Rent ____ How Long? ____	
Monthly Payment	\$
Contingent Liabilities:	\$
As an endorser or co-maker	\$
On leases or contracts	\$
Legal claims	\$
Provisions for Federal and State taxes	\$
Other contingent liabilities (itemize)	\$
	\$
	\$
TOTAL CONTINGENT LIABILITIES	\$

SCHEDULE #1 - BANKING REFERENCES (List all bank accounts including Savings and Loans)

Institution Name and Address	Account Number	Contact Officer	Cash Balance

Total Schedule #1**SCHEDULE #2 - STOCKS AND BONDS**

Number of Shares	Description of Security	Marketable or Non	Balance on Margin	Current Market Value

Total Schedule #2**SCHEDULE #3 - ACCOUNTS/NOTES RECEIVABLE**

Received From	Amount

Total Schedule #3**SCHEDULE #4 - REAL ESTATE INVESTMENTS (List all real estate held)****The legal and equitable title to all real estate listed in this statement is in the name of the applicant unless otherwise indicated.**

Description	Date of Purchase	Cost	Mortgage Balance	Market Value	Liens	Payment

Total Schedule #4**SCHEDULE #5 - LOANS, NOTES AND MORTGAGE PAYABLE**

Payable To	Amount

Total Schedule #5**SCHEDULE #6 - CREDIT CARD DEBT**

Payable To	Amount

Total Schedule #6

(Attach extra sheets if necessary)

(Attach extra sheets if necessary)

2. Discuss two present and two previous **personal** goals and levels of achievement with those goals.

- 3. Please summarize your interest in franchising, specifically with East of Chicago Pizza CompanySM.**

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal blue or grey lines across its entire width. The lines are uniform in thickness and spacing, providing a template for handwriting practice or general note-taking. There are no margins, text, or other markings present on the page.

The undersigned hereby certifies that the information on this Request for Consideration form is true and complete. The undersigned authorizes East of Chicago Pizza CompanySM to conduct an in-depth investigation as to the undersigned's background, including, but not limited to, educational background, employment history, credit history, personal character and other information which East of Chicago Pizza CompanySM may deem pertinent. The undersigned further authorizes any persons, company, employer, financial or educational institution to provide any information regarding the undersigned to East of Chicago Pizza CompanySM.

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