



CANDIDATE SUMMARY

CLARKE AQUISITION COMPANY, INC.

P.O. Box 356, Bridgeport, TX 76426
254-294-5885

www.BUSHSCHICKEN.COM



CANDIDATE PERSONAL SUMMARY

CANDIDATE PERSONAL QUALIFICATION SUMMARY

(Please return Immediately)

☐ Ms. ☐ Mrs. ☐ Mr. Date of Birth: ____/____/____

Last Name: _____ First Name: _____ Middle Initial: ____

SSN: ____ - ____ - ____ Driver's License Number: _____ State of Issue: ____

Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____

Fax: (____) _____ Email: _____

Residence: ☐ Own ☐ Lease/Rent

Home Address: _____

City: _____ State: _____ Zip Code: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

Spouse's Full Name (if applicable): _____

Spouse's Date of Birth: ____/____/____ Spouse's SSN: ____ - ____ - ____

Spouse's Driver's License Number: _____ State of Issue: ____

Children's Names and Ages: _____

Were you referred to us by a current franchisee? ☐ Yes ☐ No

If yes, who referred you? _____



CANDIDATE PERSONAL SUMMARY

CURRENT OCCUPATION: _____

Describe Your daily Duties in your current occupation: _____

Spouse's Current Occupation: _____

FORMER EMPLOYERS: List below your last two employers - list your most recent employer first.

Dates Employed (Mo/Yr)	Employer's Name and Address	Salary	Position	Reason for Leaving
From: To:				
From: To:				

EDUCATION, HIGHEST LEVEL ACHIEVED: _____

☐ High School Graduate ☐ Bachelor's Degree ☐ Master's Degree ☐ Doctoral Degree

School Attended	Major Field(s) of Study	Years Attended/Degrees Received

PROFESSIONAL TRAINING AND/OR CERTIFICATION: _____



CANDIDATE PERSONAL SUMMARY

PRIOR FRANCHISING EXPERIENCE: _____

PRIOR BUSINESS EXPERIENCE AS AN OWNER OR MANAGER: _____

PERSONAL REFERENCES:

Name	Relationship & Years Known	Contact Information

Will this franchise be your only source of income? ☐ Yes ☐ No

If not, please identify every source of income and the annual amount of each source:

Source	Annual Net Income	Total



CANDIDATE FINANCIAL SUMMARY

CANDIDATE FINANCIAL QUALIFICATION SUMMARY

(Please return Immediately)

Financial/Personal Data:

Current Annual Income: \$_____ Spouse's Annual Income: \$_____

Capital Available for Investment: \$_____
(unencumbered cash)

STATEMENT OF FINANCIAL CONDITION:

Assets	Description	Total
Cash on hand - Checking		\$
Cash on hand - Savings		\$
Cash on hand - Investment		\$
Securities - Tradeable		\$
Securities - Not Tradeable		\$
Notes Receivable		\$
Accounts Receivable		\$
Retirement Savings		\$
Profit Sharing		\$
401(K)		\$
Personal Property		\$

Real Estate Owned	Description & Address of Each	Equity at Fair Market Value
Homestead		\$
Parcel 1		\$
Parcel 2		\$
Parcel 3		\$
Parcel 4		\$
Other Real Estate		\$



CANDIDATE FINANCIAL SUMMARY

STATEMENT OF FINANCIAL CONDITION (continued):

Assets	Description	Total
Automobile 1		\$
Automobile 2		\$
Automobile 3		\$
Equipment & Other Business Assets		\$
Other Assets (itemize)		\$
Total Assets	\$	

ANNUAL USE OF CASH:

Living Expense - Annual Income Tax & FICA	\$
Business Expenses - Annual	\$
Total Annual Payments	\$
Contingent Liabilities	\$
Total	\$



CANDIDATE FINANCIAL SUMMARY

LIABILITES:

Liabilities	Description	Total
Note 1 Payable		\$
Note 2 Payable		\$
Note 3 Payable		\$
Mortgage - Homestead		\$
Mortgage - Parcel 1		\$
Mortgage - Parcel 2		\$
Mortgage - Parcel 3		\$
Funds Due Brokers		\$
Income Due		\$
State Tax Due		\$
Lien on Automobile 1		\$
Lien on Automobile 2		\$
Credit Card Debt -		\$
List all Credit Cards with Balances Due and the Balance of Each		
Other Liabilities		\$
Total Liabilities		\$



CANDIDATE SUMMARY

Best Time to call: _____ ☐ AM ☐ PM

Availability: When would you be able to visit our Corporate Headquarters?

☐ 2-4 Weeks ☐ 1-2 Months ☐ Other Dates: _____

When would you be available to start your franchise? Month: _____ Year: _____

What are your preferred locations? Please be specific.

1. _____

2. _____

3. _____

How did you hear about Bush's Chicken? _____

Tell us about any other information you believe would assist us in evaluating your qualifications: _____

By submitting this completed form, it is understood that I am under no obligation and that this information is provided to assist in evaluating my personal, professional, and financial qualifications as a prospective franchisee. I understand that you may check my credit history as part of this process and hereby give my permission to do so.

The person(s) signing this application below certify that the above information is true and correct to the best of their knowledge. The undersigned authorize Bush's Chicken to make inquiries it considers necessary and appropriate concerning the above information and to give information about this transaction to other parties, including credit-reporting agencies, in accordance with the law. The undersigned agree to notify Bush's Chicken of any material changes in the above stated financial condition.

Signature: _____

Signature: _____

Date: _____

Date: _____



CANDIDATE SUMMARY

STATEMENT OF NO ASSOCIATION TO TERRORISM

Neither of the person(s) signing below as the prospective franchisee, nor anyone having an ownership or other interest in the prospective franchisee, nor any affiliate, parent, child or spouse of the prospective franchisee, supports terrorism, provides money or financial services to terrorists, or is engaged in terrorism, is on the current U.S. government list of organizations that support terrorism, nor has engaged in or been convicted of fraud, corruption, bribery, money laundering, narcotics trafficking or other crimes, and all are eligible under applicable U.S. immigration laws to travel to and from the United States for training. The undersigned hereby grants Bush's Chicken and any of its affiliates to acquire credit, employment, and/or background checks in accordance with all laws for verification of the representations herein.

Signature: _____

Signature: _____

Date: _____

Date: _____

For office use only:

For visit to our Headquarters

☐ Approved ☐ Disapproved

Acceptance for Franchisee License

☐ Approved ☐ Disapproved
