
FRANCHISEE EVALUATION FORM

GENERAL INFORMATION

Company Name :

Address :

City / Town :

State :

Phone :

Fax :

Mobile :

E-mail :

Website :

Contact Person :

Designation :

Qualification :

YOUR COMPANY DETAILS (Put NA if not applicable)

Established Since :
 Company Type : Proprietor: Private Limited: Limited : Partnership
 Bankers :
 Nature of Business :
 Total Investment till date :
 Turnover in last 2 years :
 Last year
 Previous to last year
 Your leading clients : 1.
 2.
 3.

COMPANY INFRASTRUCTURE (Put NA if not applicable)

Total Area in terms of Sq. feet :
 No. of Rooms :
 No. of Workstations or Labs :
 Do you own/Leased the premises? :

Hardware Details

•# No. of PC's :
 •# LapTops :
 •# LCD projectors :
 •# TV's :
 •# Others :

Details of Licensed Software & Operation Systems :-

(Add sheets if required)

HR Details

No. of staffs :
 Break up of staffs
 1. Admin :
 2. Sales support :
 3. Faculty :
 Faculty Full Time :
 Part time :

DETAILS OF IT EDUCATION RELEVANT EXPERIENCE

1.# Do you have any experience with IT Training Industry ? Yes / No

a.# If Yes,

Please categorize yourself in below options:

- i.# I Own a Training Centre
- ii.# I Owned a Training centre in the Past
- iii.# Have worked in a Training centre as_____
- iv.# Others

b.# If No,

- # Why do you want to become an IT Education Franchisee

- # Are you Aware of the Infrastructure Requirements?: Yes/No
- # Why do you want to enter the IT education business (Please brief us in a separate sheet of paper.) ?
- # Are you confident in running the business in your location
- # Are you aware of the investments? Yes/No
- # Do you have formal education/experience knowledge on IT? Yes/No
- # Have you worked for any IT company? Yes/No
- # If yes, Please mention the Co. Name:
- # How fast can you create the infrastructure & recruit the required team.
- # Do you have College/Educational institution/Corporate contacts in your area.

2.# Do you run a Training Center at the moment? Yes / No

a.# If Yes :

Which Brand you are operating :
 Brand Name :
 Own Brand :

How many Students you train a month?

Do you have any International Tie-ups?

(Microsoft / Sun / Oracle / Redhat / Others)

List the Tie-ups you have with the Colleges and schools in you location:

Colleges	Schools

Courses Handled : 1.
2.

3.# Reasons for wanting to Change?

GEOGRAPHICAL DETAILS

City / Town :

Avg. Population of your Town

No. of Schools in you town

No. of Eng Colleges in your town

No. of Polytecnic Colleges in your town

No. of Arts & Sci Eng Colleges in your town

Who are the other competitors present in your location?

- 1.
- 2.
- 3.
- 4.

Name the remote Locations in near proximity

Location	Distance
1.	
2.	
3.	
4.	

Others

1. Rate your Contacts with Colleges in you Location

V.Strong	Strong	Average	Below Average	No Contacts
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2. Rate your Contacts with Schools in you Location

V.Strong	Strong	Average	Below Average	No Contacts
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3. Rate your Contacts with local clubs & social groups in you Location

V.Strong	Strong	Average	Below Average	No Contacts
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Date :

Signature with Seal