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## Request for Consideration

The purpose of this Request for Consideration is to evaluate your qualifications to be awarded a SINGAS FAMOUS PIZZA license. Should you qualify and a mutual interest develops, we will request additional information. We do request that this form be completed before the licensing process continues.

Please return all forms to SINGAS FAMOUS PIZZA.

Personal data: (please type or use a ball point pen)

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_  
E-mail address \_\_\_\_\_  
Address \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
Own \_\_\_\_\_ Rent \_\_\_\_\_  
Business phone \_\_\_\_\_ Home phone \_\_\_\_\_  
Best time to call \_\_\_\_\_  
Date of birth \_\_\_\_\_ Driver's license # \_\_\_\_\_ State \_\_\_\_\_  
Marital status \_\_\_\_\_  
Spouse's name \_\_\_\_\_ Occupation \_\_\_\_\_  
Number of dependants \_\_\_\_\_ Ages \_\_\_\_\_  
How did you hear of this opportunity? \_\_\_\_\_

Do you have specific direct sales/marketing  
experience? \_\_\_\_\_

### Location Preferences

1<sup>st</sup> choice \_\_\_\_\_  
2<sup>nd</sup> choice \_\_\_\_\_  
3<sup>rd</sup> choice \_\_\_\_\_

Do you own any other licensed franchise or any foodservice operation(s)