



To enable us both assess the business potential of quality Computer Education in your territory, please provide information on following:

A. PERSONAL

Name & Address _____
Contact Number _____
Mobile : _____
Land Line : _____

Educational Background _____

(Self & Partners) _____

Experience / current occupation _____

Computer Skills _____

Investment Capacity _____

Hardware existing for Office use, if any _____

A TERRITORIAL

a) City/Cities (Where you Wish to start) _____

b) City Population (As per _____

Census Report) _____

 c) Existing Business & Industries (for each City) _____

 D) How many colleges and Non technical Educational institutions Situated near by your Proposed institution _____

 E) How many students study In colleges and non technical Education institutions (approx) _____

 F) If you wish to add any Other information/ data Which you consider Important, please mention . _____

IN DETAILS

1. Whether individual / Pvt. Ltd. / Public Ltd. / H.U.F. / Partnership _____

2. Period of Existence (on no. Of Years) _____

3. Any subsidiary / sister concerns _____

4. If yes, names & address of each such concern _____

5. Existing Loans - Types, Sources _____

6. Funds available for this venture And sources thereof. _____

7. Prior Experience of activity with Financials for last three years _____

8. Why did you decide to go in for Education Business _____

9. Property to be used for this venture

a) Whether Selected already? If yes, Ownership-Title, Pledge, Hypothecated, Lien, Charges etc.

b) Rental-period of Lease, Rentals

c) Whether well connected by Normal Means of Transport

d) Whether situated in commercial Area

e) Area in Sq.Mts./Sq.Ft.

10. Ability to pump in additional funds If necessary If yes, proposed sources of funds

11. Time required to set up Education Centre after signing of Agreement

12. Whether study conducted about Prospective students regarding;

a. Number of students expected To Enroll

b. Courses offered by other Institutes

c. Educational Level/Background of Students expected to enroll

d. Name Computer Training Institution your area. In the City

e. Price Levels / Per Capita Income

f. Industries/Companies that would absorb the students

13. Whether full time attention /
Involvement will be ensured by
self

14. List some demand full computer
courses in your Area.

Today's Date : ___/___/_____

Place : _____

Full Signature

Note

Please send **20%** of the Franchisee Fee (which is negotiated) for Centre Inspection through DD in favour of “ **Shine Institute of Management and Information Technology Pvt. Ltd.**” Payable at “ **Balasore** ” which will be adjusted in your Franchisee Fee. After receiving the DD & the Franchise Application Form , then our inspection team will visit to your Centre for further progress.