



LAUREL HOME SCHOOL

Franchise Application Form (To be completed by Prospective Franchisee)

(Please write in CAPITAL letters)

Part - 1

Personal Information

Name of Applicant	<input type="text"/>		
Age	<input type="text"/>	Gender	<input type="text"/>
Land line No.	<input type="text"/>	Mobile No.1	<input type="text"/>
Mobile No.2	<input type="text"/>	CNIC	<input type="text"/>
Email	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		

Qualification	Institution
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Professional Qualification	Institution
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Part - 2

Profession: Job Business Retired

2.1 In Case of Job	Employed <input type="checkbox"/>	Self Employed <input type="checkbox"/>			
2.2 In Case of Business	Retail <input type="checkbox"/>	Wholesale <input type="checkbox"/>	Service Industry <input type="checkbox"/>	Consultancy <input type="checkbox"/>	Other <input type="checkbox"/>
2.3 If served in Education Sector	More than 3 years <input type="checkbox"/>	More than 7 years <input type="checkbox"/>	More than 10 years <input type="checkbox"/>		

Part - 3

Are you currently operating any educational institute? Yes No

3.1 If Yes	<input type="text"/>				
3.2 Name of the institute	<input type="text"/>				
3.3 City / Location	<input type="text"/>				
3.4 Level of Institute	Pre-School <input type="checkbox"/>	Primary <input type="checkbox"/>	Middle <input type="checkbox"/>	High <input type="checkbox"/>	H.Sec <input type="checkbox"/>
3.5 Medium of Instruction	English <input type="checkbox"/>	Urdu <input type="checkbox"/>			
3.6 Type of Campus	Boys <input type="checkbox"/>	Girls <input type="checkbox"/>	Co-Education <input type="checkbox"/>		
3.7 Total Number of Students	<input type="text"/>				
3.8 Would you like to convert your existing institute into LHS?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Wait <input type="checkbox"/>		

Part - 4		Opening of New Campus		
4.1	You intended to open:	Single Unit <input type="checkbox"/>	Multiple Units <input type="checkbox"/>	
4.2	Would you run the Campus?	Personally <input type="checkbox"/>	Partnership <input type="checkbox"/>	Delegate <input type="checkbox"/>

Part - 5		Preferences of Institute Type		
5.1	Pre. School <input type="checkbox"/>	PG, Nursery, PREP	<input type="checkbox"/>	
5.2	Junior School <input type="checkbox"/>	I - V Class	<input type="checkbox"/>	
5.3	Senior School <input type="checkbox"/>	VI - X Class	<input type="checkbox"/>	
5.4	Comprehensive School <input type="checkbox"/>	PG - X Class	<input type="checkbox"/>	

Part - 6		Proposed Location for Opening New Institute	
City		Area/Location	
Preference-I		Preference-I	
		Preference-II	
		Preference-III	

Part - 7		Property for the Institute		
7.1	Status of Proposed Property	Owned <input type="checkbox"/>	Rented <input type="checkbox"/>	To be arranged <input type="checkbox"/>
7.2	Type of Property	Residential <input type="checkbox"/>	Commercial <input type="checkbox"/>	
7.3	Total Plot / Area of Property Kanal	Covered Area	

Part - 8		Facilities / Utilities available in the Proposed Area / Location		
8.1	Open Space <input type="checkbox"/>	Parking <input type="checkbox"/>		
8.2	Telephone <input type="checkbox"/>	Internet <input type="checkbox"/>		
8.3	Road Access <input type="checkbox"/>	Link <input type="checkbox"/>	Main <input type="checkbox"/>	
8.4	Auditorium <input type="checkbox"/>	Capacity of Persons:		
8.5	Beside Road <input type="checkbox"/>	Width of Road		
8.6	Inside the Street <input type="checkbox"/>	Width of the Street		

Part - 9 **Neighboring Institute(s)**

Name of School	Medium	Average Fee (if known)
▶		
▶		
▶		
▶		
▶		
▶		

Part - 10 **General**

When do you plan to start the institution	Month	Year

Anything that you like to mention:

Please return this Application form to:
 Projector Director: Laurel Home Schools
 Head Office: MES Near Aghosh Complex , Civic Center
 Town Ship, Lahore
 Tel: 042-35114205-7 E-mail: info.laurelhome@gmail.com

Applicant's Signature: _____
 Date: _____