

Franchise Survey Form

Expectations from a Franchiser

* Indicates required question

1. Email *

2. Name of Franchisee/Organization *

3. Contact Information (City, State & Phone no) *

4. Preferred Location/Region for the School (State and City)

5. What type of curriculum are you most interested in? *

Mark only one oval.

CBSE

ICSE

IB

6. What support do you expect from the franchiser?

Check all that apply.

- Curriculum and Academic Guidance
- Staff Recruitment and Training
- Marketing and Brand Promotion
- Increase in admission
- Infrastructure Development
- Operations Support
- Technology Integration
- Financial Assistance or Advice
- Other: _____

7. What is your primary goal in starting this school?

Check all that apply.

- Long-term financial growth
- Community development
- Quality education delivery
- Other reason: *(Specify)*
- Other: _____

8. What challenges or concerns do you foresee in this partnership?

9. What factors would influence your decision to partner with us?

Check all that apply.

- Strong Brand Reputation
- Proven Track Record in Education
- Affordable Franchise Fee
- Comprehensive Support System
- Alignment of Vision and Values

10. What timeline do you have in mind for starting operations?

Mark only one oval.

Less than 1 year

1-2 years

2-3 years

11. Are there any specific requirements or expectations you have from the franchiser?

12. Any additional suggestions or comments?

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