

Form #1

KITCHEN NIGHTMARES CASTING APPLICATION OWNER/OPERATOR

Section 1: The Restaurant

Name of the owner completing applic	cation:
Name of restaurant:	
Address:	
City, State, Zip Code:	
Phone:	
Personal email:	
Restaurant email:	
Restaurant website:	
Type of restaurant/cuisine (deli, bistr	o, country club, etc):
Size of restaurant:	
Size of front of house (sq. ft):	Size of back of house (sq. ft):
How many floors?	
How many does your restaurant seat	?
How many does your bar seat? (if app	nlicable):
Where is the kitchen located? (main fl	loor, basement, etc):
Service (breakfast, lunch, dinner):	
Hours of operation:	
Number of employees: Full Time _	Part Time
How long have you been open? (List e	exact date)
Do you have a liquor license?	
Is it a family owned/run business?	
Number of owners:	Number of working partners:

Do you have a business license? Yes/No, Federal ID# of Corporation, if any:
The name of any parent companies, DBA's, etc:
Investors Name, Company Name and Phone Number(s):
Do you own the building property? If not, please list the landlord's name, address, and phone number below:
List all types of insurance you currently have (fire, building, theft, etc):
List five things the restaurant needs help with (can be issues, employees, customers, locations, be descriptive): 1.
2.
3.
4.
5.
What is your 5-year goal for the restaurant?
How many restaurants do you own/have you owned? List names, locations, and dates:

Why should Gordon Ramsay pick you and your restaurant? Give your history, passion, and motivation for keeping your business alive and getting to the next level of success:
Describe your Employees:
Front of House:
Back of House:
Do your employees who are supervisors do their jobs? If not, why?
What is your employee turnover rate?
Do you spend more time at the back or front of house? Why?
What are your biggest daily challenges?
What would it take to make your business better?
Who is your biggest competitor and why?

<u>Section 2: The Owner</u> – each owner must fill out section 2 below (If more than 2 owners, please complete their information on an additional page.)

Name of owner #1:		
Home Address:		
City, State, Zip Code:		
Cell phone number: ()	Work phone	e number: ()
Home phone number: ()		
Please indicate the best number you	can be reached at	(i.e. cell):
E-mail Address:		
Circle One: Male / Female	Age:	Birth date:
Height: Weight:	Hair Color:	Eye color:
Ethnic Origin (Please circle one):		
American Indian or Alaska Native Black, African American Caucasian or White Guamanian or Chamorro Vietnamese Korean Native Hawaiian, Samoan Other Race- Specify	Asian American Hispanic, Latino, of Japanese Chinese Filipino Other Asian- Spec Other Pacific Islan	ify
Are you a U.S. Citizen or a permanen	t legal U.S. Reside	nt?
If not, list your current residency stat	us:	
Highest level of education – List scho graduation(s) if applicable:	ol(s), date(s), you a	attended and

Culinary Education – list school(s), date(s), you attended and graduation date(s) if applicable.

Name of owner #2	2:		
Home Address:			
City, State, Zip Co	ode:		
Cell phone numbe	er: ()	Work pho	ne number: ()
Home phone num	ber: ()		
Please indicate th	e best number you	ı can be reached a	t (i.e. cell):
E-mail Address:			
Circle One: Male /	' Female	Age:	Birth date:
Height:	Weight:	Hair Color:	Eye color:
Ethnic Origin (Plea	ase circle one):		
American Indian of Black, African Am Caucasian or Whit Guamanian or Cha Vietnamese Korean Native Hawaiian, S Other Race- Speci	erican te amorro Samoan	Asian American Hispanic, Latino Japanese Chinese Filipino Other Asian- Spe Other Pacific Isla	ecify
Are you a U.S. Cit	izen or a permane	nt legal U.S. Resid	ent?
If not, list your cu	rrent residency sta	atus:	
Highest level of ed graduation(s) if ap	ducation – List sch oplicable:	ool(s), date(s), you	ı attended and
Culinary Education	n — list school(s), c	date(s), you attend	ed and graduation

date(s) if applicable.

Section 3: Lifestyle / Personal

Are you fluent in any language other than English?
List a few hobbies, interests, activities or sports you enjoy doing:
Describe what pressure means to you:
Describe your style of work and how you perform on a deadline:
How do you react to criticism?
Are you a "Yes," man / woman?
What are your strengths as a restaurant owner?
W/leah ava various also access as a weaks weak assess?
What are you weaknesses as a restaurant owner?
How often are you at the restaurant?
Hanning the same of a same
How would your employees describe you? (be specific)
Describe a list of your day-to-day duties in the restaurant:

Who creates the menu?
In your restaurant, what is more important — taste or presentation?
Where did you learn how to run a restaurant? (School, self taught, family business, etc.)
How many times a week do you eat out and where?
Do you have a favorite famous Chef? If so, list whom and why:
What are you most passionate about in life?
What is the accomplishment for which you are most proud?
Do you have any special talents? If so, what are they?
Do you consider yourself a competitive person and why or why not?
How would your family describe you?
Who are your role models or heroes and why?

Explain the most life-changing event you have been through:
Why do you want to participate in Kitchen Nightmares?
If you could have anything in the world to change your life, what would it be and why?
Have you ever appeared in any television programs, films, movies, commercials, or advertisements of any kind? If so, please provide details:
Have you ever been or participated in a reality television show? If so, please list the title, airdate and network:
Are you a member of any professional performing arts unions? (SAG, AFTRA, AGMA, AEA, etc.):
Is there anything about your life that you would NOT want to be made public on TV?
Have you ever been arrested, detained, or convicted of a felony or misdemeanor offense either as a juvenile or as an adult? If so, please provide details and dates:
Are you involved in any past and/or pending litigation? If so, please explain:
Have you ever had a restraining order placed against you? If so, please provide details and dates:

Section 4: Family

Current ma	rital sta	atus (circle one):		
A. Single	B. Dat	ing		
C. Married	How I	ong?	How ma	any times?
D. Not mar	ried, bu	t living with sign	ificant other	How long?
E. Separate	ed	How long?		
F. Widowed	I	How long?		
G. Divorced	ł	How long?		
Do you hav	e any cl	nildren? Is so, lis	t their names	and ages:
Section 5:	Medica	I		
		- ave medical insu	ırance?	
Medical Ins	-			
Have you ev	ver had	any significant p	hysical menta	al or medical conditions?
If you have	any phy	ysical limitations	, would you be	e able to perform the
		required to part modations? (i.e.	•	program if given
reasonable	accorri	nouations: (i.e.	WileelChair Tai	пр, е.с.)
If accommo	odations	s are required, p	lease describe	:
Have you ev	ver beei	n treated for any	serious physic	cal or mental illness withir
the last 5 y	ears? If	so, please descr	ribe in detail, i	ndicating dates, diagnosis ines or difficulties:
and any on	-going t	realinents, prest	ription medic	ines of difficulties.
		-		please explain the
circumstan	ce and	what types of tre	:atment(S) you	i ve nau (ii any):

Do you smoke? If yes, how much?
Do you drink alcohol? If yes, how much?
Have you ever had problems with alcoholism or any other drug-related addiction? If so, please provide more details including how long you've been in recover, if that's the case:
Have you participated in any type of 12 step program or support group? If so, which one(s)?
List all medications you are currently taking and why you are taking them:
Explain in detail, any surgeries you've had in the past 5 years:
··· Continue to the Following Page···

Please list any allergies you have and your current treatment for them:

REQUIREMENTS FOR ELIGIBILITY

- 1. I am at least eighteen (18) years of age and a legal U.S. citizen or permanent legal U.S. resident.
- 2. I have disclosed, below, to the best of my knowledge, anyone I know who is now, or has been in the past two (2) years, an officer, director, employee, agent or representative of:
 - (a) Upper Ground Enterprises, Inc., ITV Studios, Inc., A. Smith & Co., Optomen Television Limited, FOX Broadcasting Company or any of their respective licensees, assigns, parent, subsidiary and affiliated entities, or affiliated or subsidiary companies, or any division or agent of any of them;
 - **(b)** Any television station or channel, cable network, or satellite network that may air the Program:
 - **(c)** Any person or entity involved in the development, production, distribution or other exploitation of the Program or any variation thereof;
 - (d) Any sponsor of the Program or its advertising agency;
 - (e) Any person or entity supplying prizes or other services to the Program.
- **3.** Neither I nor any member of my immediate family or anyone living in my household is currently or has been within the past two (2) years an employee, officer, director, agent or representative of any of the following:
 - (a) Upper Ground Enterprises, Inc., ITV Studios, Inc., A. Smith & Co., Optomen Television Limited, FOX Broadcasting Company or any television station owned and operated by FOX.
 - **(b)** Any person or entity involved in the development, production, distribution or other exploitation of the Program or any variation thereof;
 - (c) Any sponsor of the Program or its advertising agency;
 - (d) Any person or entity supplying services or prizes to the Program.

Producers reserve the right to render ineligible any person who Producer determines, in their sole discretion, is sufficiently connected with the production, administration, judging, or distribution of the Program such that his or her participation in the Program could create the appearance of impropriety.

- **4.** I am not a candidate for public office and will not become a candidate until one (1) year after the initial broadcast of any episode(s) of the Program in which I appear.
- **5.** I have not appeared as a participant on more than two (2) other television game or contest shows within the last five (5) years from the tape date of the episode(s) in which I may have appeared. In addition, I have not appeared as a participant on more than one (1) television game or contest show within the past twelve (12) months from the tape date of the episode(s) in which I may have appeared (regardless of whether such appearance has been broadcast or cablecast).

List of show(s) if any:

6. If I am selected to participate in the selection process or Program, I acknowledge that I will be required to sign all waivers and release agreements in connection with participating in the Program.

- **7.** If I am selected to participate, I will be exclusively available to producers in Los Angeles or elsewhere for the participant selection process. If I am selected to participate in the program, I will need to be exclusively available to Producers for approximately 1 week (7 days) for taping of the Program and if necessary any follow-up at Producers' discretion.
- **8.** I am willing to submit, authorize and undergo medical, psychological and background investigation as part of the selection process. 9. Being chosen to interview at any level will not ensure that I will be selected to continue through the selection process. Producers reserve the right to disqualify or exclude, at their sole discretion any individual from the interview and selection process at any time. Producers also reserve the right to change the rules and procedures at any time.
- **9.** Being chosen to interview at any level will not ensure that I will be selected to continue through the selection process. Producers reserve the right to disqualify or exclude, at their sole discretion any individual from the interview and selection process at any time. Producers also reserve the right to change the rules and procedures at any time.

--- Continued to the Following Page---

APPLICATION RELEASE

I hereby acknowledge that I have read and I meet the eligibility requirements. I hereby certify that all statements made in this application are true and complete. I understand that if any of the disclosures made by me on this application are false, this will be cause for disqualification of my consideration for this production.

I further acknowledge and accept that this application form and any other materials (including, but not limited to, photographs, and videotapes) I have submitted or will submit to Upper Ground Enterprises, Inc. will become the sole and exclusive property of Upper Ground Enterprises, Inc. and will not be returned to me. I understand that as the owner of this material Upper Ground Enterprises, Inc. shall have the right to edit, distribute and exploit the material submitted in any manner in its sole discretion but shall have no obligation to do so. By signing below, I grant to Upper Ground Enterprises, Inc. the right to use any biographical information contained in this application, my home video or taped interview, and to record, use, and publicize my home videotape or taped interview, voice, actions, likeness and appearance in any manner in connection with this production.

I hereby release and indemnify Upper Ground Enterprises, Inc., ITV Studios, Inc., A. Smith & Co., Optomen Television Limited and Fox Broadcasting Company and all of their respective licensees, assigns, successors, parents, affiliated and subsidiary companies, divisions, and joint ventures as well as their employees, officers, directors and agents (collectively, the "Released Parties") from any and all claims or demands of every kind that I or any third party may now or hereafter have against the Released Parties in connection with my application to appear in the production and the exploitation of any and all materials I have submitted in connection therewith, or any exercise by any or all of the Released Parties of any of the rights I am granting hereunder, or any other matter contained herein, including, but not limited to, any claims for defamation, violation of rights of privacy and/or publicity, negligence, and/or intentional infliction of emotional distress.

I agree to keep in strictest confidence and to not use or disclose to any party any information or trade secrets obtained or learned as a result of this questionnaire, application, selection process or participation in the program (as applicable), including, without limitation, any information concerning or relating to the program, the events contained in the program, Upper Ground Enterprises, Inc.'s or the network's production activities relating to the program or the outcome of the program that I read, hear or otherwise acquire or learn in connection with or as a result of this questionnaire, application, selection process or participation in the program (as applicable) (collectively, the "Confidential Information and Materials") regardless of whether an episode of the program has been exhibited which may include some or all of the Confidential Information and Materials, without the express prior written consent of a duly authorized representative of Upper Ground Enterprises, Inc.

Date:		
Signature:		
Print Name:		