



Name:

Business Name:

Phone Number:

Fax Number:

Mailing Address:

Website:

Email:

Any Other Decision Makers

Please complete and return this questionnaire as soon as possible by emailing or faxing back to my office. This questionnaire is designed to help me determine if there is a good fit between you and your business goals and my coaching services. The questionnaire includes general questions about your goals and ownership/leadership style as well as more specific questions relating to your business. It is important for you to be as honest and accurate as you can.

Your Business

1. What type of business are you in?

- Professional Service Manufacturing Retail Wholesaler/Distributor
 Other

2. Please list the specific types of products and/or services you provide for your customers.

3. How long have you been in business?

4. How did you acquire this business?

- Started Bought existing Franchised Inherited
 Other

5. What is the legal structure of your business?

- Sole Proprietorship Partnership S-Corporation
 C-Corporation Limited Liability Company
 Other

6. Who, other than yourself, is involved in the decision making of your business?

7. Do you have a business plan?

- Yes No



If yes, how often do you compare and measure your progress to the plan?

- Monthly
 Quarterly
 Annually
 I don't
 Other

Your Marketing

- Why would a customer buy from you and not your competition? What makes you unique?
- How do you generate leads for your business? Please provide estimated percentages on the following:
- | | | | | | |
|--------------|---|------------|---|----------------------|---|
| Yellow Pages | % | Radio | % | Daily Newspaper | % |
| Local Paper | % | Television | % | Telemarketing | % |
| Direct Mail | % | Catalogues | % | Face to face calling | % |
| Referrals | % | Flyers | % | Magazine Advertising | % |
| Walk-Ins | % | Other | % | | |
- What is your conversion rate (ie, what % of leads actually buy from you)?
- Is your conversion rate estimated or measured?
 Estimated Measured

Your Customers

- Do you keep a computer database of your customers? Yes No
- Please describe your top market groups. (E.g., business owners, consumers, etc.)
- How many customers do you have (that you would you classify as being "active"?)
- What is your typical customer's average dollar sale?
- What is the average number of times/year a customer buys your product(s) or service(s)?



6. Which of the following do you use to keep in contact with your customers?

Regular Letter	%	Newsletters	%	Event Invitations	%
Invoices	%	Thank you Cards	%	Catalogues	%
Phone Calls	%	Other	%		%

7. What frustrations (in general) do customers in your industry frequently experience?

Your Sales Goals

1. What revenues and profits has your business generated in the past 3 years and what do you project for the current year? If you do not have 3 years history, just include the years you do have.

Projected 2019:	Revenue	Profit
2018:	Revenue	Profit
2017:	Revenue	Profit
2016:	Revenue	Profit

2. What percentage growth do you expect to see in the next 12 months?

3. How do you see this growth being achieved?

4. If you had one wish for your sales & marketing in the next 30 days, what would that be?

5. I have a the following documents in writing: *(Please check all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> Mission Statement | <input type="checkbox"/> Unique Selling Proposition (USP) |
| <input type="checkbox"/> Vision Statement | <input type="checkbox"/> Business Goals |
| <input type="checkbox"/> Culture Statement | <input type="checkbox"/> Personal Goals |
| <input type="checkbox"/> Organization Chart | |

Yourself as a Business Owner

1. What percent of your time, on average do you devote to the following activities:

- % Strategic Planning
- % Business Development and Marketing
- % Day to day operational or tactical requirements
- % Trouble-shooting and fighting fires
- % Other

2. Do you have an exit strategy? Yes No
If yes, when do you plan to exit your business and how?



3. Please describe your strengths as a business owner.
4. Please describe the areas where you need improvement as a business owner.
5. What are the biggest frustrations you have with your own business?
6. What parts of your business do you enjoy MOST or find the most rewarding?
7. What parts of your business do you enjoy LEAST or find the least rewarding?
8. How many hours per week do you currently work on average?
How do you feel about this?
9. What are your hobbies? How do you currently spend time outside of your business?
10. If you had enough time and financial resources to do anything you choose, how would you spend your time outside of your business?
11. Which statement best describes you? Check ONLY one...
 - I'm an action oriented person who is most comfortable when in charge.
 - I'm a 'people' person who values friendships in my work relationships and likes to build
 - I'm calm and cool under pressure and like to make logical rather than emotional decisions.
 - I like to study lots of information before making decisions.

Your Team

1. How many employees, on average, have you employed in the past 3 years?
 - Currently
 - 1 Year ago
 - 2 Years ago
2. Please describe your "ideal" employee.
3. What is your average employee turnover percentage?
4. Of your current employees, how many fall into each of the following categories?



They always do their job well AND they come up with new and innovative ways to help make me/my company better and more profitable each day.

They always do their job well.

They mostly do their job, but I have to stay on top of them.

They rarely do their job.

5. On average, compared to your competitors, how would your employees describe the work environment at your company?
- Better
 - About the same
 - Worse
6. On average, compared to your competitors, how would your employees describe the wages they receive?
- Better
 - About the same
 - Worse
7. On average, compared to your competitors, how would your employees describe the benefits they receive?
- Better
 - About the same
 - Worse
8. What compelling reason does a prospective employee have for joining your team? Why would they want to work for you as opposed to one of your competitors?
9. What team or staff challenges are you currently facing on a regular basis?
10. If you could make any changes to your team, what would they be and why?



Coachability

1. Are you coachable? Yes No
2. In what ways do you feel you will benefit from having a business coach?
3. If there was one thing you could change about your business in the next 90 days, what would it be and why?
4. Is there any additional information you feel would be valuable for our discussion?

Congratulations and thanks for your time...

Thank you for taking the time to complete this questionnaire. It's very important for both of us to fully understand your current situation – that way we can focus on the areas of greatest need and importance to you. If you have any specific questions on any area of the questionnaire, please don't hesitate to contact me at 862-219-6890 or via email at: Thom@SBAnow.com

Please fax back at least 24 hrs. before our appointment to 862-219-6891.

Confidentiality Note

The information contained in this questionnaire is confidential information intended only for the use of **Thom Torode** and the person completing this questionnaire. If the receiver of this questionnaire is not the intended recipient, the receiver is hereby notified that any dissemination, distribution, copy or publication of the questionnaire is strictly prohibited.