

SCORE

Counselor's to America's Small Business

From: _____ Your assigned SCORE Counselor

Client name _____ Date _____

Dear _____

Attached is a Questionnaire with questions about your proposed new business. I would ask that you complete the Questionnaire and bring your answers to our first counseling session, which we have set for:

Day _____ Date _____ Time _____ Location _____

The SCORE office address is: 3650 Colonial Blvd. Suite 231
Fort Myers, FL 33966

The Questionnaire attached is designed to help you prepare for our initial counseling session by asking you to think through some of the items you will be faced with in starting your proposed new business. Most new businesses fail within a few years, not because the idea is unsound, but because the entrepreneur is not fully prepared with a solid plan which includes not only the STARTUP phase but the longer term follow-up. Too many business people also underestimate the not the funds but the amount of daily sweat equity required to launch a new business. Your answers to the questions combined with SCORE counseling will help you determine if you are indeed ready to start your own business. And if not now, what needs to be done and the type of assistance required.

Please write/type your answers on a separate sheet so you can be as expansive as you want, and be completely candid. If you already have a BUSINESS PLAN you may not need to go through this exercise again, but it would be worthwhile for you to see if all the questions asked are answered in your PLAN. Your completed Questionnaire will be the basis for our initial counseling session. So please bring your answers to our first session.

You will find that this preparation will be very helpful to you, even before we meet, in determining what next must be done to help you achieve your objective.

If for any reason you are unable to keep our appointment as per above, please call me at _____ and leave word, and we will set another date.

Thanks for calling SCORE!

SCORE PRE-COUNSELING QUESTIONNAIRE
To be completed by client prior to first meeting

Client Name _____

1. Why do you want to start your own business?
2. What type of business will it be as compared to existing competition? What is your competition, and what niche will you fill?
3. What is your business experience in this field of endeavor? What skills are required, and do you possess those skills? If not, how will you compete?
4. Are you prepared for the longer hours as an owner, possible losses the first year, handling the administrative work including marketing your service/products, bookkeeping, purchasing, bill paying, etc. required at the outset?
5. Is this a home based business or out of a facility? Have you found a location? What is your proposed name for your new business?
6. If you plan to operate out of your home do you have office and storage space? Will your community allow this type of business to operate out of your home?
7. How do you plan to market your product/service: advertising, business cards, printed material, etc. Explain.
8. Develop a monthly Cash Flow statement for your first year in business including expenses and projected revenues, in addition to capital required for startup.
9. What will be your source of funds for this business, separate from income needed to provide for your household living expenses? To what extent will your present household income continue if you leave your present employment, and will that cover household expenses? Does your spouse provide income?
10. What is your credit rating? What are your major monthly expenses and will they continue?
11. What will be your form of organization: sole proprietor, Sub S, partnership. What determined your choice?
12. Have you discussed your proposed business with a lawyer, an accountant or bookkeeper, insurance agent, and factored in these costs?
13. In what areas do you feel that SCORE counseling can be of most assistance?