



U.S. Small Business Administration

Office of Entrepreneurial Development  
**Follow-up Economic Impact Survey**

OMB Number 3245-0351  
Expiration 06/30/2012

Dear Small Business Client:

Within the last twelve months you were kind enough to respond to our request for some initial data regarding your visit(s) to SBA's Entrepreneurial Development resource partner, the **[Small Business Development Center (SBDC), Women's Business Center (WBC), SCORE]**. To continually understand the impact our programs and services are having on the economy it would be helpful to know if our assistance to you regarding starting and managing a business resulted in job creation, increases in your business' revenues or other results.

We understand that you responded to a thorough survey not so long ago, but we ask that you help us in answering a few questions for this online follow-up questionnaire by clicking on the following URL:  
<http://www.surveymaker.com/survey/survey>

After completing this online survey, you will receive a confirmation page indicating your survey was accepted. All responses to these questions are voluntary and will be held in confidence. If you have trouble accessing the survey, please contact Matthew Herman at [mherman@concentrance.com](mailto:mherman@concentrance.com) or 202.223.8877. The data will not be released to any other government agency or private firm. Based on your visit to the [SBDC, WBC, SCORE], please use that experience as a benchmark to answer the following:

1. Are you currently in business?

Yes  No

**If YES when was the business started?** \_\_/\_\_\_\_  
mm/ yyyy

1a. **If NO, when do you plan on starting a business?**

Within 30 days  31-90 days   
91-120 days  No idea at this time

1a. **If NO, when do you plan on starting a business?**

Have you ever been in business? Yes  No

If YES, when was the business started? \_\_/\_\_\_\_  
mm/ yyyy

2. As a result of the assistance received from the [SBDC/WBC/SCORE] Counselor which of the following were you able to develop [i.e., Business Plan] in order to start or better manage your business.  
**[Check all that apply]**

- Business Plan Strategy  
 Marketing Plan  
 Promotional Plan  
 Pricing Strategy  
 Cash Flow Analysis
- Loan Package  
 Hiring Plan  
 Training Plan for Staff  
 Financial Strategy  
 E-Commerce Strategy
- Purchasing  
 Feasibility Plan  
 Production Plan  
 Distribution Plan  
 Other
- 

3. What was the approximate annual gross revenue for each of the calendar years below:

2007: \_\_\_\_\_  
 2008: \_\_\_\_\_

4. Counting yourself, how many people full-time employees (35 hours or more per week) and part-time employees (less than 35 hours per week), did you have at the end of the following years you were in business? *If you were not in business, just write N/A in the appropriate blank.*

2007 \_\_\_\_\_ Number of Full-time employees  
 2008 \_\_\_\_\_ Number of Full-time employees

2007 \_\_\_\_\_ Number of Part-time employees  
 2008 \_\_\_\_\_ Number of Part-time employees

5. If you were projecting to reduce your total number of employees prior to counseling, how many positions do you/have you retained due to the counseling?

Existing Full-time jobs saved \_\_\_\_\_  
 Existing part-time jobs saved \_\_\_\_\_

6. I would refer the counseling services I received to other small businesses.

Strongly Agree  Agree  No Opinion  Disagree   
 Strongly Disagree

7. Have you utilized any other SBA resources/program?

Yes  No

If YES, select those you used **[Check all that apply]**

SCORE  SBA's guarantee loan programs

SBDC  SBIC Venture Capital Program

Women Business Center  SBA's Surety Bond Program

Small Business Training Network  SBA's Disaster Assistance  
Program

PLEASE NOTE: The estimated burden for completing this form is less than 8 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3<sup>rd</sup> St., S.W., Washington, D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Building, Room 10202, Washington, D.C. 20503. OMB Approval (3245-0351). PLEASE DO NOT SEND FORMS TO OMB.

SBA Form 2214

THANK YOU