

Business Alive Application and Questionnaire

Your Name: _____

Business Legal Name: _____

Business Address: _____

Business Phone: _____ Email: _____

Type of Business: i.e. sole proprietor, partnership, LLC: _____

Describe your business: _____

How long have you been in business in Taos? _____

Do you have any other locations? If so, where? _____

How many employees do you have? _____

Who/what is your target customer/market? _____

What challenges did your business face before Coivd-19?

Questionnaire

1. Do you have any long-term plans to grow your business? Describe those plans.

2. Does your business offer anything unique/hard to find anywhere else? _____

3. What percentage of your inventory is locally produced? Imported? _____

4. What is your current system for managing your inventory?

5. Are you willing to participate in surveys before, during, and after the program to help us understand how we can improve this program in the future?

Yes No

6. Are you willing to provide general information about the sales/revenue of your business?

**Responses will be kept confidential*

Yes No

7. Are you currently marketing your business? If so, how/what are you doing?

8. Do you have a website? If so, please list your URL. _____

a. Can your customers purchase anything from you on your website? If so, what forms of payment do you take (Credit Card, Pay Pal, etc.?)

9. How do you think a website will help support your business?

10. Do you have social media pages for your business? If so, list the platforms you utilize.

11. Do you sell to customers on your Social Media sites or other websites (Etsy, Amazon, etc.)?

12. Are you currently able to ship products to your customers? _____

13. How much time do you have per week to dedicate to this program, including working with a web developer and attending educational webinars?

None 1-2 hrs./week 3-6 hrs./week 8+ hrs./week

14. On a scale of 1-10 rate your current technical ability to manage a website: 1 being "I have no ability"; 10 being "I am an expert"

1 2 3 4 5 6 7 8 9 10

15. On a scale of 1-10 rate your current technical ability to manage a social media page: 1 being "I have no ability"; 10 being "I am an expert"

1 2 3 4 5 6 7 8 9 10

16. What area of e-commerce do you need the most help with?

17. Are you interested in other professional development opportunities? If yes, please list the topics.

