



Small Business Center

Impact Survey

Survey Year 2017-2018

For Staff Use:

Dear Small Business Center Client:

Thank you for using the Small Business Center (SBC) at Durham Technical Community College. In order to maintain the quality of our services, we ask that you complete the survey and return it in the stamped, self-addressed envelope or return by fax to 919-536-7291 or scan and return by email to sbc@durhamtech.edu. Your response is confidential and it is vital to the continuation of the services provided by the SBC.

Name: _____ Signature _____ Date: _____

Business Name: _____

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|--|---|------------------------|---------------|---------------|---------------|---------------|---------------|----------|----------|----------|-------------|-------------|--|---|-------|-------------|-------------------|-------|---|-------|-------------|-----------------|-------|---|-------|-------------|-----------------|-------|---|-------|-------------|---------------|-------|---|-------|-------------|-----------------|-------|---|-------|-------------|---------------|-------|---|-------|-------------|
| <p>1. PLEASE LET US KNOW YOUR SATISFACTION WITH OUR COUNSELING AND/OR SEMINAR/WORKSHOP SERVICES:</p> <table border="0"><tr><td>COUNSELING</td><td>SEMINARS</td></tr><tr><td>___ Excellent</td><td>___ Excellent</td></tr><tr><td>___ Very Good</td><td>___ Very Good</td></tr><tr><td>___ Good</td><td>___ Good</td></tr><tr><td>___ Fair</td><td>___ Fair</td></tr><tr><td>___ Poor</td><td>___ Poor</td></tr></table> | COUNSELING | SEMINARS | ___ Excellent | ___ Excellent | ___ Very Good | ___ Very Good | ___ Good | ___ Good | ___ Fair | ___ Fair | ___ Poor | ___ Poor | <p>PLEASE LET US KNOW IF YOUR BUSINESS FITS INTO ANY OF THESE CATEGORIES:</p> <p>18. _____ Is 8 (a) Certified</p> <p>19. _____ Is MBE Certified</p> <p>20. _____ Has SAM Registration</p> <p>21. _____ Is Exporting Goods/Services</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COUNSELING | SEMINARS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ___ Excellent | ___ Excellent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ___ Very Good | ___ Very Good | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ___ Good | ___ Good | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ___ Fair | ___ Fair | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ___ Poor | ___ Poor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>2. WOULD YOU USE OUR SERVICES AGAIN?</p> <p>___ Yes</p> <p>___ No</p> <p>___ Unsure</p> | <p>SOME OF OUR CLIENTS HAVE BEEN SUCCESSFUL IN OBTAINING CONTRACTS. IF YOU HAVE, PLEASE LET US KNOW ABOUT YOUR SUCCESS</p> <table border="0"><tr><td>22. Commercial/Private</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>23. DOD Prime</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>24. DOD Sub</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>25. Federal Prime</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>26. Federal Sub</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>27. State Prime</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>28. State Sub</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>29. Local Prime</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr><tr><td>30. Local Sub</td><td>_____</td><td>#</td><td>_____</td><td>Amount (\$)</td></tr></table> | 22. Commercial/Private | _____ | # | _____ | Amount (\$) | 23. DOD Prime | _____ | # | _____ | Amount (\$) | 24. DOD Sub | _____ | # | _____ | Amount (\$) | 25. Federal Prime | _____ | # | _____ | Amount (\$) | 26. Federal Sub | _____ | # | _____ | Amount (\$) | 27. State Prime | _____ | # | _____ | Amount (\$) | 28. State Sub | _____ | # | _____ | Amount (\$) | 29. Local Prime | _____ | # | _____ | Amount (\$) | 30. Local Sub | _____ | # | _____ | Amount (\$) |
| 22. Commercial/Private | | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. DOD Prime | | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. DOD Sub | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25. Federal Prime | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26. Federal Sub | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27. State Prime | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28. State Sub | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 29. Local Prime | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30. Local Sub | _____ | # | _____ | Amount (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>3. WOULD YOU RECOMMEND OUR SERVICES TO OTHERS?</p> <p>___ Yes</p> <p>___ No</p> <p>___ Unsure</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>If not Yes, please explain:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Please tell us about your success. Answer only those questions that apply to your business during the past 12 months.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>4. AS A RESULT OF RECEIVING ASSISTANCE FROM THE SMALL BUSINESS CENTER, I:</p> <p>___ Started a Business Date Opened: _____</p> <p>___ Stabilized a Business</p> <p>___ Expanded a Business</p> <p>___ Postponed Plans</p> <p>___ Other (specify) _____</p> <p>___ Closed Business</p> | <p>WHAT ADDITIONAL ASSISTANCE IS NEEDED?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>WITH ASSISTANCE FROM THE SBC, I:</p> <p>5. _____ Created a Business Plan</p> <p>6. _____ Created this number of new, full-time jobs</p> <p>7. _____ Saved/retained this number of full-time jobs that were at possible risk of loss</p> <p>8. _____ Created this number of new, part-time jobs</p> <p>9. _____ Saved/retained this number of part-time jobs that were at possible risk of loss</p> <p>10. _____ % increase in gross sales or _____ Amount (\$)</p> <p>11. _____ % increase in profit or _____ Amount (\$)</p> <p>12. _____ Loan Application Submitted _____ Amount (\$)</p> <p>13. _____ Loans Obtained _____ Amount (\$)</p> <p>14. _____ SBA Loan Obtained _____ Type</p> <p>15. _____ Owner Investment _____ Amount (\$)</p> <p>16. _____ Other Capital Invested _____</p> <p>17. _____ Other _____ Amount(\$)_ _____ Type</p> | <p>OTHER COMMENTS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Would you be interested in participating in a Small Business Advisory Committee for Your Business industry?</p> <p>___ Yes</p> <p>___ No</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Equal Opportunity Affirmative Action Employer