

## Survey of Local Entrepreneur Needs for Success

1. Do you consider yourself to be an entrepreneur or a potential entrepreneur?  
\_\_YES    \_\_NO
2. Are you interested in starting a new business or enterprise in the next year?  
\_\_YES    \_\_NO
3. Have you started a business or enterprise during the past three years?  
\_\_YES    \_\_NO
4. Are you primarily interested in ideas for sustaining or expanding an existing business?  
\_\_YES    \_\_NO
5. What are the greatest assets contributing to the potential for entrepreneurial success in your community or region?
6. What are the biggest hurdles faced by your entrepreneurial business?
7. What do you see as the biggest hurdle to your personal entrepreneurial success?
8. What do you see as the largest barrier(s) to entrepreneurial success in your community/region?
9. What is the most important thing that could be done locally to help entrepreneurial businesses succeed in the area?
10. Do you have any other suggestions for improving the local opportunities for entrepreneurial success?

(optional) Name: \_\_\_\_\_ Phone: \_\_\_\_\_