

MicroTest Client Outcomes Tracking Survey

SECTION B: SURVEY QUESTIONS TO ASK CLIENT

INTRODUCTION:

Hi, we are conducting a confidential survey to learn more about the experiences of people who received services from the [Program Name]. The [Program Name] is conducting this survey in order to better serve its clients. Your responses will help [Program Name] understand what it is doing well, and what changes it should consider in its products and services. This survey will take only about 15 - 20 minutes. Any information that you provide will remain strictly confidential and not affect your status with [Program Name]. Would this be a good time to begin?

i	Please indicate the status of the client's survey:	<input type="checkbox"/> Client completed survey (skip to question #1) <input type="checkbox"/> Could not contact because of Bankruptcy or other legal proceedings <input type="checkbox"/> Could not survey, do not know business status in 2011 <input type="checkbox"/> Could not survey, but we know that the client HAD a business during 2011 <input type="checkbox"/> Could not survey, but we know that the client DID NOT HAVE a business during 2011
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ii	If you could not survey the client but knew their business status, please explain how you knew their business status. i.e. client returned for services in 2011, client confirmed the business was still open but would not complete survey, etc.	
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1	Our information shows that you were a borrower or received services from [Program Name] in 2010, is that correct? <i>If yes, proceed. If no, from your records remind them of the services they received (for example, "I have in my notes that you received a \$5,000 loan in 2007 and were still repaying that in 2010", or "I have that you attended the Entrepreneurial Training Course in May and June of 2010)." If they agree, proceed with the interview. If they are adamant that they did not receive services, thank them for their time and end the interview.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> DK <input type="checkbox"/> No <input type="checkbox"/> RF
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Interviewer must determine business status of client at intake prior to interview. If client had a business at intake, ask Q2a, if client did not have a business at intake ask Q2c.

2a	Our information shows that when you first came to [Program Name] you were operating a business. Is that correct? <i>Note to the interviewer: If the answer is NO, remind them about the business they reported at intake. For example: "our records show that you had a restaurant that you started in 1999 and since you enrolled with the Program in 2004, it looks like you did have a business at intake." Record their response in Q2b below. If they insist they did not have a business, proceed to Q5. If they change their mind and say "Yes, I forgot, I did have a business," then check Yes in Question 2a and proceed to Q3.</i>	<input type="checkbox"/> Yes (skip to question #3) <input type="checkbox"/> DK <input type="checkbox"/> No <input type="checkbox"/> RF
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2b	Please describe.	
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2c	Our information shows that when you first came to [Program Name] you were Not operating a business. Is that correct? <i>Note to the interviewer: If the answer is NO, remind them that they said they did not have a business at intake. Record their response in Q2d below. If they change their mind and say, "I forgot, I did not have biz," then check Yes in Question 2c and proceed to Q5. If they insist they had a business at Intake, ask to see if it was the same business they came to the program for help. Record their response in Q2d below and proceed to Q3.</i>	<input type="checkbox"/> Yes (skip to question #5) <input type="checkbox"/> DK <input type="checkbox"/> No <input type="checkbox"/> RF
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2d	Please describe.	
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3	Now I'm going to read you a list of choices about your highest priority for assistance. Please choose the one that best fits your highest priority for assistance when you first went to [Program Name].	Were you: <input type="checkbox"/> seeking help in testing and assessing an early stage business? <input type="checkbox"/> trying to stabilize or improve your business's operations? <input type="checkbox"/> trying to substantially grow the size of your business? <input type="checkbox"/> seeking help because of an immediate or threatening problem? <input type="checkbox"/> Other? <input type="checkbox"/> DK <input type="checkbox"/> RF
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4	Describe "other."	
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5	How well did [Program Name] meet your expectations?	<input type="checkbox"/> Completely met (skip to question # 6) <input type="checkbox"/> Mostly met (skip to question # 6) <input type="checkbox"/> Mostly not met <input type="checkbox"/> Not At All met <input type="checkbox"/> DK <input type="checkbox"/> RF
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5a	What could [Program Name] have done to better meet your expectations for assistance?	
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Now I'm going to ask you a few questions about your business, if you have one.

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6	Did you operate a business at any time during Jan-Dec 2011? A business is considered a business when it has made sales or when the client has taken steps to formalize the business.	<input type="checkbox"/> Yes <input type="checkbox"/> DK <input type="checkbox"/> No (skip to question #7) <input type="checkbox"/> RF
6a	If Yes, how many businesses did you operate during Jan-Dec 2011?	# of Businesses (skip to question #8) <input type="checkbox"/> DK <input type="checkbox"/> RF
7	If No, have you ever been in business?	<input type="checkbox"/> Yes (If YES, ask questions #8-10a, then skip to #27) <input type="checkbox"/> DK <input type="checkbox"/> No (If NO, SKIP to question #27) <input type="checkbox"/> RF
8	When did you start your business? (MM/YYYY)	____ (MM/YYYY) <input type="checkbox"/> DK <input type="checkbox"/> RF
9	If applicable, when did your business close? (MM/YYYY). If NA (business still open), SKIP to #11	____ (MM/YYYY) <input type="checkbox"/> DK <input type="checkbox"/> RF
10	Why did you close your business? Please check the best answer based on client's response	<input type="checkbox"/> Bankruptcy <input type="checkbox"/> Insufficient sales or customer interest <input type="checkbox"/> Other problems with the business or business strategy <input type="checkbox"/> Preferred a wage job <input type="checkbox"/> Illness or health reasons of business owner <input type="checkbox"/> Needed to take care of family member/ other household concerns made continuation of the business difficult <input type="checkbox"/> Moved <input type="checkbox"/> Other (please specify) <input type="checkbox"/> DK <input type="checkbox"/> RF
10a	Please specify other.	_____
11	Please describe your business in detail. <i>Interviewer: Be sure the description allows NAICS classification by including the product or service provided, whether the business is in manufacturing, distribution or retail, and whether the business is wholesale or retail.</i> If answer to #6a is >1: "If you have multiple businesses, please describe the business you came to the program for help with." If the client doesn't remember or didn't have a business when they first came to the program than they should describe their primary business (the one that brings in the most money or the one they feel has the most potential for growth)	_____
12	<i>Interviewer, please enter NAICS code of the business after you conclude the survey</i>	_____
13	On average, did you work at your business full-time, part-time, or seasonally in 2011? Full-time represents at least 35 hours of work a week.	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> DK <input type="checkbox"/> RF
14	How many months of the year did you work at your business in 2011?	____ # of months <input type="checkbox"/> DK <input type="checkbox"/> RF
15	How many weeks per month did you typically work in 2011?	____ # of weeks <input type="checkbox"/> DK <input type="checkbox"/> RF
16	How many hours per week did you typically work in 2011?	____ # of hours <input type="checkbox"/> DK <input type="checkbox"/> RF

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Remember, all this information is strictly confidential.		
17	What were your gross, or total, business sales during 2011 (Dollars)?	\$ _____ <input type="checkbox"/> DK <input type="checkbox"/> RF
18	<i>Interviewer: If you have the client's financial statements or Schedule C, please provide the client's Net Profits in 2011.</i>	\$ _____ <input type="checkbox"/> DK <input type="checkbox"/> RF
19	How much income did you actually pay yourself from your business in 2011?	\$ _____ <input type="checkbox"/> DK <input type="checkbox"/> RF
20	How much income did you expect to pay yourself from your business in 2011?	\$ _____ <input type="checkbox"/> DK <input type="checkbox"/> RF
21	How well would you say the amount you paid yourself from your business meets the goals you had for your business at this point in its development?	<input type="checkbox"/> Exceeded expectations (<i>skip to question #24</i>) <input type="checkbox"/> Met Expectations (<i>skip to question #24</i>) <input type="checkbox"/> Somewhat met expectations (proceed to question #22) <input type="checkbox"/> Did not at all meet expectations (proceed to question #22) <input type="checkbox"/> DK <input type="checkbox"/> RF
22	What is the main reason you feel those expectations were not met?	<input type="checkbox"/> Underestimated expenses <input type="checkbox"/> Broader market and state of the economy <input type="checkbox"/> Market took longer to develop; fewer customers than anticipated <input type="checkbox"/> Business took more time than expected <input type="checkbox"/> Business needed more capital than expected <input type="checkbox"/> Personal issues or illness of owner or family members <input type="checkbox"/> Other <input type="checkbox"/> DK <input type="checkbox"/> RF
22a	Please specify other.	_____
23	What could the [Program Name] do better to help prepare you for any challenges you have faced as a business owner?	_____
24	How did the performance of your business affect the financial circumstances of your household in 2011?	<input type="checkbox"/> Improved household situation a lot <input type="checkbox"/> Improved household situation a little <input type="checkbox"/> Neither Improved or Worsened <input type="checkbox"/> Worsened household situation a little <input type="checkbox"/> Worsened household situation a lot <input type="checkbox"/> DK <input type="checkbox"/> RF
24a	Please explain your answer to Q24.	_____
25	Not counting yourself, how many paid employees or contractors did your business have? <i>If the client had a partner who was taking a draw, please count him/her as an employee and enter details in Question 26 below.</i>	_____ # of Paid employees/contractors (<i>If 0 skip to question # 27</i>) <input type="checkbox"/> DK <input type="checkbox"/> RF
26	For each of your paid employees/contractors please indicate the hourly wage and frequency they worked during 2011. Please enter NA into any lines not needed, or DK or RF if applicable. If client has more than 10 paid employees/contractors, please record in open-ended wage, months, weeks and hours fields (26a, b, c, d).	
	Employee # 1:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
	Employee # 2:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
	Employee # 3:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
	Employee # 4:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
	Employee # 5:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011

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Employee # 6:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
Employee # 7:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
Employee # 8:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
Employee # 9:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
Employee # 10:	_____ hourly wage, _____ # months worked in 2011, _____ # weeks per month worked in 2011, _____ # hours worked per week in 2011
26a	Please enter the hourly wage rates for any additional paid employees/contractors. Separate values with commas. _____
26b	Please enter the # of months worked for any additional paid employees/contractors. Separate values with commas. _____
26c	Please enter the # of weeks per month worked for any additional paid employees/contractors. Separate values with commas. _____
26d	Please enter the hours per week worked for any additional paid employees/contractors. Separate values with commas. _____
Now I'm going to ask you a few questions about your work status and also about your household --the other people who lived with you and shared expenses in 2011.	
27	Did you have another job outside your business in 2011? If NO, SKIP to question #30. <input type="checkbox"/> Yes <input type="checkbox"/> DK <input type="checkbox"/> No <input type="checkbox"/> RF
28	Was this work part-time or full-time? <i>Full-time is at least 35 hours of work a week.</i> <input type="checkbox"/> Part-Time <input type="checkbox"/> DK <input type="checkbox"/> Full-Time <input type="checkbox"/> RF
29	What were your annual pre-tax earnings from this job in 2011? \$_____ <input type="checkbox"/> DK <input type="checkbox"/> RF
30	Counting yourself, your spouse or partner, and including children, how many people lived with you and shared income or expenses during 2011? Please do not include roommates or boarders who do not share income or expenses, but do include extended family members or significant others if they do share income and expenses. If this changed during the year, please tell me the number that lasted for the longest period of time. _____ # of people in household <input type="checkbox"/> DK <input type="checkbox"/> RF
31	In 2011, did you receive housing assistance, food assistance, cash payments for household expenses, or other public assistance? <input type="checkbox"/> Yes <input type="checkbox"/> DK <input type="checkbox"/> No <input type="checkbox"/> RF
Next we are going to talk a little about your business and other sources of income. Remember, all this information is strictly confidential.	
32	If my math is correct, the income from your business and your wages totaled \$_____ (#19 + #29) in 2011. Now I'm going to read you a list of possible other sources of income, including income for other members in your household. Please let me know if you received income from each source I read. If you had income from that source, tell me the amount of income you received. Please report all income BEFORE any taxes are deducted.

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- Salary/wages your household members received, \$ _____
- Self-employment income your household members received, \$ _____
- Unemployment benefits you or your household members received, \$ _____
- Child support or alimony you or your household members received, \$ _____
- Social security or retirement benefits you or your household members received, \$ _____
- Disability insurance you or your household members received, \$ _____
- Public assistance (TANF, food stamps, public housing, Section 8, or emergency shelters) you or your household members received, \$ _____
- Help from family (other than household members) or friends you and your household, \$ _____
- Other income you and your household members received, \$ _____
- DK
- RF

