



We Are Columbia

Social Media Training Application



Date: _____

Business Name: _____ Contact Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Email: _____

Office Phone #: _____

Cell Phone#: _____

Business License #

FED ID:

1. What is the current status of your business?

Start-up in progress

Involved in family business

Operating an existing business

Planning to expand an existing business

Purchasing or taking over a business

N/A

2. How long have you been operating your own business?

Less than 1 year

1-2 years

3-5 years

8-10 years

Over 15 years

N/A

3. Industry Type: Describe your business. For example, what type of business is it (service, manufacturing, retail, high-technology or not-for-profit).

4. Describe the nature and the range of the products and/or services you offer.

5. a. How many full-time employees do you have, including yourself?

b. How many part-time employees do you have, including yourself?

6. Do you work full-time in your business? Yes No

7. a. What is the primary location of your own business?

Your home

Partner's home

Rented space (not home)

Owned space (not home)

Incubator space

Other

b. If other, explain...

(For questions 8-11)

What is the range (nearest \$10,000) or your gross sales from your business? Please complete all years, estimating future years.

- 8. a. Year Before Last Year Gross Sales
 - b. Was it profitable? Yes No
 - c. Did you take a salary? Yes No

- 9. a. Last Year Gross Sales
 - b. Was it profitable? Yes No
 - c. Did you take a salary? Yes No

- 10. a. Current Year Gross Sales (Projected)
 - b. Are you projecting a profit? Yes No
 - c. Will you take a salary? Yes No

- 11. a. Next Year Gross Sales (projected)
 - b. Will it be profitable? Yes No
 - c. Will you take a salary? Yes No

- 12. What are your plans for the future? For example, increase sales; reach new markets, etc...

- 13. Please explain what kind of formal social media training you have done. What impact has it had on your business?

Effective Social Media Presence for Businesses

	Facebook	Twitter	LinkedIn	YouTube	Flickr	Pinterest	Vimeo	SlideShare	Google+	Other
Name:										

Select All That Applies

Submit completed application with payment (if applicable) to:

Office of Business Opportunities:

Attn: Angelo McBride
1225 Lady Street, Suite 102
Columbia, SC 29201
Phone 803-545-3960
Fax 803-255-8912 or 803.299-8912