



How can we help you?

Please take a moment to fill out this survey so we can better assist you.

1. Did you register your business with the state that you reside in?

- Yes
- No
- In the process

2. How long have you been in business?

- 0-1 year
- 1-3 years
- 3 years or more

3. Do you have a website?

- Yes
- No
- In the process

4. Do you work your business full-time?

- Yes
- No
- In the process

5. Do you need short-term assistance?

- Yes
- No
- Not sure

6. Do you need long-term assistance?

- Yes
- No
- Not sure

7. Have you received assistance before?

- Yes
- No
- Not sure

8. How soon are you ready to start?

- Immediately
- 3-6 Mo.
- Not at this time

Additional Comments

About You

Name

Address

Phone

Email

May we add you to our mailing list for future events? Yes No

Thank you for your participation!

www.uprisingstarsinc.org