Personal & Business Questionnaire

Personal Information

- 1. Full Name:
- 2. Email Address:
- 3. Phone Number:
- 4. Preferred Method of Contact:
 - o Email
 - o Phone
 - Text

Personal Background

- 5. Briefly describe your educational background:
- 6. What is your current occupation?
- 7. Do you have any prior entrepreneurial experience? If yes, please describe:

Business Information

- 8. Business Name:
- 9. Business Website (if applicable):
- 10. Business Address:
- 11. Type of Business (e.g., LLC, S-Corp, Sole Proprietorship):
- 12. Industry:
- 13. Year Business Established:

Business Background

14. Please describe your business and the products or services you offer:



- 15. How many employees do you have?
- 16. What is your current annual revenue?
- 17. What are your primary business challenges?

Experience & Skills

- 18. Do you have experience with the following? (Check all that apply):
- Business planning
- Marketing and sales
- Financial management
- Business credit management
- Real estate investing
- Fundraising and securing investments



20. What areas do you feel you need the most improvement in?

Goals & Vision

- 21. What are your short-term business goals (next 6-12 months)?
- 22. What are your long-term business goals (next 3-5 years)?
- 23. How do you define success for your business?
- 24. What are your personal financial goals?



Current Business Stage

- 25. Which of the following best describes your current business stage?
- Idea/Concept stage
- Startup (0-1 year in business)
- Established business (3+ years in business)
- 26. Have you secured any funding for your business? specify the type and amount:

If yes, please

- 27. Do you currently have business credit?
- 28. Have you made any real estate investments related to your business? If yes, please describe:

Specific Needs & Interests

- 29. What specific topics or areas are you most interested in learning about in this course? (Check all that apply):
- Building business credit
- Securing funding
- Real estate investing
- Financial management
- Scaling and growth strategies
- No PG (personal guarantor) funding
- 30. Do you have any specific questions or concerns you hope to address during this course?



Additional Information

31.	Is there any	additional	information	you would	like to sha	are about y	ourself or	your
	husiness?							

32.	How	did	you	hear	about	The	Wealth	Passp	ort	course?

Submission

- Please submit your completed questionnaire to:
- **Deadline for submission:** 48 hours prior to your scheduled course

Thank you for taking the time to complete this questionnaire. Your responses will help us tailor the course to meet your specific needs and goals. We look forward to working with you on your journey to building, funding, and scaling your business!



