PROFILE OF ENTREPRENEURS

Name and Surname __________________________ Age ________________

Contacts __________________ email ________________________________

Highest level of education ____________________________

Name of business _______________________________________

Year of establishment ___________________________________

Business location _______________________________________

Number of employees __________

Name of program attended _________________________________

Type of business:

____________________________________________________________________________________

____________________________________________________________________________________

Who are you current customers?

____________________________________________________________________________________

____________________________________________________________________________________

Are your operating your business full-time or part-time?

____________________________________________________________________________________

How many dependants do you have?

____________________________________________________________________________________

____________________________________________________________________________________

Tell us about your family background before starting the business?

____________________________________________________________________________________

____________________________________________________________________________________
How has the business improve your household?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

How has your business improved since being part of the JA program?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

What challenges have your encountered since you started the business? How can JA assist you?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Which other businesses do you see yourself venturing into?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

How has your business progressed since it was established? Are you satisfied with the progress?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Any other comments.
______________________________________________________________________________________
______________________________________________________________________________________