

Needs Assessment for Entrepreneurial Support

The following form is to be used in determining client eligibility for the *Self Employment Benefits Program*. Clients must demonstrate a need for support in the business planning development section as well as one other area. Topics given under each heading are examples only and not exhaustive. Need for support is defined as a score of five or less.

A. Business Plan Development

- Business Planning
- Establishing measurable targets
- Assessing Opportunity
- Statutory Compliance (legal, permits, etc)
- Breakeven Analysis

Client possesses:

No training or experience										Extensive Training and/or experience	
1	2	3	4	5	6	7	8	9	10		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments and Recommendations

B. Financial Management - General

- Budgeting and forecasting
- Capital requirements
- Costing
- Statutory requirements (taxation for example)
- Inventory control

Client possesses:

No training or experience										Extensive Training and/or experience	
1	2	3	4	5	6	7	8	9	10		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments and Recommendations

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C. Financial Management - General

- Bookkeeping
- Financial statements preparation and assessment
- Cash flow
- Accounts receivable and credit granting

Client possesses:

No training or experience										Extensive Training and/or experience
1	2	3	4	5	6	7	8	9	10	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments and Recommendations

D. Marketing Management

- Marketing Plan and Strategy
- Product or Service Pricing
- Sales Tactics
- Advertising and Promotion

Client possesses:

No training or experience										Extensive Training and/or experience
1	2	3	4	5	6	7	8	9	10	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments and Recommendations

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E. Organizational Skills

- HR management
- Stress and time management
- Scheduling
- Planning

Client possesses:

No training or
experience

1

2

3

4

5

6

7

8

Extensive Training
and/or experience

9

10

Comments and Recommendations

F. Personal Development

- Problem solving
- Goal Setting
- Decision making
- Negotiation skills

Client possesses:

No training or
experience

1

2

3

4

5

6

7

8

Extensive Training
and/or experience

9

10

Comments and Recommendations

Needs Assessment for Entrepreneurial Support

G. Communication Skills

- Written communication skills
- Verbal communications skills
- Listening skills
- Customer Service

Client possesses:

No training or
experience

1

2

3

4

5

6

7

8

Extensive Training
and/or experience

9

10

Comments and Recommendations

H. Computer Skills

- Word processing
- Internet/E-mail
- Spreadsheet creation
- Software (Simply Accounting, for example)

Client possesses:

No training or
experience

1

2

3

4

5

6

7

8

Extensive Training
and/or experience

9

10

Comments and Recommendations