

**BUSINESS CONSULTING CLIENT INTAKE FORM**

Disclaimer: Thank you for your interest in being a client of [CONSULTANT'S NAME]. This form is used to collect information about new clients and for internal purposes only. The information you provide is confidential and will be treated accordingly.

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| **CLIENT INFO** |

**Client Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Website**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Fax Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Business Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Industry** **Classification**:

[ ]  Retail

[ ]  Food service
[ ]  Agriculture/farming

[ ]  e-Commerce

[ ]  Not-for-profit

[ ]  Association

[ ]  Healthcare services

[ ]  Professional services
 *(legal, accounting, consulting)*

[ ]  Financial services

[ ]  Business services
 *(advertising, printing, etc.)*

[ ]  Technology/telecom services

[ ]  Construction/maintenance

[ ]  Manufacturing

[ ]  Other:
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please briefly describe your business or organization in 2 to 3 sentences**:

**Your role within the organization**:

[ ]  Owner/partner

[ ]  Employee

[ ]  Senior manager

[ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Advisor

|  |
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|  **CONSULTING INFO**  |

**What kind of business consulting assistance do you need?**

[ ]  Start-up planning, feasibility, etc.

[ ]  Business planning

[ ]  Accounting, financial analysis

[ ]  Growing the business

[ ]  Market strategy and research

[ ]  Operations manager

[ ]  Solving a problem or challenge

[ ]  Promotion/advertising planning

[ ]  Human resources management

[ ]  Other:
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How long have you been in operation?** [ ]  0-1 year [ ]  1-3 years [ ]  More than 3 years

**What are your short-term financial goals?** (e.g., break-even, become profitable, achieve sales targets, etc.):

**Briefly describe your ‘typical’ customer – or the customer you would like to attract**:

**Why do you think you need a consultant, and what results are you looking for?**:

**Are there any specific deadlines or timeline we should be aware of?**:

**How did you learn about us?**

[ ]  Word of mouth [ ]  Google/other search engine [ ]  Social media [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is there anything else you think we should know?**:

|  |
| --- |
| **ACKNOWLEDGMENT** |

Client signature: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_