

**COMPANY PROFILE INFORMATION - MENTOR PROTÉGÉ PROGRAM**

Your information will be held in strict confidence. The questions below are requested to assist in identifying an appropriate business Mentor. Return the questionnaire to the Chamber Office and indicate on the envelope "Mentor Protégé Program".

1. Company Name \_\_\_\_\_
  2. Annual Gross Sales \_\_\_\_\_ 3. Number of Employees \_\_\_\_\_
  4. Number of years in business \_\_\_\_\_ 5. Are you MBE certified? \_\_\_\_\_  
If so, by whom? \_\_\_\_\_
  5. Do you have a Business Plan? \_\_\_\_\_ What year was it updated? \_\_\_\_\_
  6. Do you have a Marketing Plan? \_\_\_\_\_ What year was it updated? \_\_\_\_\_
  7. Do you have current financial information? \_\_\_\_\_ Year of last financial report \_\_\_\_\_
  8. Define your core business \_\_\_\_\_  
\_\_\_\_\_
  9. Number of customers \_\_\_\_\_
  10. Define your sales market \_\_\_\_\_
  11. Your company does business:  
\_\_\_\_\_ regionally \_\_\_\_\_ statewide \_\_\_\_\_ nationally \_\_\_\_\_ internationally
  12. State your reasons for wanting to participate in the Mentor Protégé Program \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  13. Are you comfortable sharing your business information with a prospective Mentor? \_\_\_\_\_
  14. Can you provide customer references to confirm the quality of services your company provides? \_\_\_\_\_
- Your Name \_\_\_\_\_
- Telephone Number (with area code) \_\_\_\_\_

Send to: African American Chamber of Commerce of Western Pennsylvania  
Regional Enterprise Tower, 425 Sixth Avenue, Suite 1330, Pittsburgh, Pa. 15219