………………………………………………………………………….………………………

*(COMPANY NAME)*

*BUSINESS SUMMARY DATA FORM*

*Submitted for MSME CoR*

Date Prepared: ………………………

Contact Information:

*Key Personnel Full Name: ………………………………………………………………….*

*Position: ………………………………………………………………………………………*

*Email: ………………………………………………………………………………………….*

*Phone: ………………………………………………………………………………………….*

**SECTION 1: BUSINESS MANAGEMENT STRUCTURE**

**1.1** How many people are in the Management Team: **Total: \_\_\_\_\_\_\_ Men: \_\_\_\_\_\_\_\_ Women: \_\_\_\_\_\_\_\_**

**1.2 How many are youths?**

**1.3** Gender and Age of leadership

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Position** | **Gender**  **(Male /Female)** | **Age (Adult/Youth)** | **Leadership Position** | **Gender**  **(Male / Female)** | **Age**  **(Adult/Youth)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**1.4** is the business operational? **1.** No **2.** Yes

**1.5** Where is the business located?

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**1.6 When did the business start operating? ------------------------------------------------------------------------------------------**

**1.7 Does your business have a written business plan? 1. No. -------- 2. Yes. --------------------**

**SECTION 2: PRODUCT / SERVICE PROVISION**

What product or services does your business provide?

|  |  |
| --- | --- |
| **Product / Service** | **5** |
| 1 | **6** |
| 2 | 7 |
| 3 | 8 |
| 4 | 9 |

**SECTION 3: RECORDS KEEPING**

Which of the following types of Business records do you keep?

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Record** | **(Yes / No)** | **Type of Record** | **(Yes / No)** |
| None |  | Production plans |  |
| Employee |  | Production |  |
| Employee salaries & wages |  | Inventories (operations inputs) |  |
| Product supply contracts |  | Inventories (produce/outputs) |  |
| Assets register |  | Debtors register |  |
| Budgets |  | Financial Statements |  |
| Creditors register |  | Share capital register |  |
| Receipts & expenses |  | (Others) specify |  |
|  |  |  |  |

**SECTION 4: BUSINESS MANAGEMENT ASSESSMENT**

To assess the business capabilities, may you please answer yes or no to the following questions on your production and operations, marketing, research & development, management, human resources, and information system/information technology.

**4.1. PRODUCTION / OPERATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Item** | **Yes** | **Partly** | **No** |
| **4.1.1** | **Purchasing** |  |  |  |
|  | Does the business have a purchasing program/plan in place? |  |  |  |
|  | Does the Business have reliable and reasonably priced suppliers? |  |  |  |
| **4.1.2** | **Inventory Control** |  |  |  |
|  | Does the Business have effective inventory control policies and procedures? |  |  |  |
|  | Has the Business established re-ordering policies? |  |  |  |
| **4.1.3** | **Quality Control** |  |  |  |
|  | Does the Business do well on quality assessments? |  |  |  |
|  | Are poor quality incoming materials returned to vendors? |  |  |  |
|  | Are reject rates minimized? |  |  |  |
|  | Does the production / operations process work smoothly and with little disruptions? |  |  |  |
| **4.1.4** | **Facilities** |  |  |  |
|  | Are facilities strategically located close to resources and markets? |  |  |  |
|  | Are facilities, offices, machinery, and equipment in good working condition? |  |  |  |
|  | Does the business have low accident/fatality incidences (safety)? |  |  |  |
| **4.1.5** | **Insurance** |  |  |  |
|  | Does the business have an annual insurance policy? |  |  |  |
|  | Are the business properties risks covered? |  |  |  |

**4.2. MARKETING**

What is the average quantities of products /services do you sell in a month? ……………………..………………………

Which is your target market for your business products / services? ………………………………………………………..

Who are your main competitors? …………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………..

**4.3. MARKET RESEARCH T**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Item** | **Yes** | **Partly** | **No** |
|  | Does the business conduct market surveys? |  |  |  |
|  | Is there a scheduled programme for conducting the surveys? |  |  |  |
|  | Does the business know the market share it commands? |  |  |  |

**4.4. FINANCIAL/ACCOUNTING**

| **#** | **Item** | **Yes** | **Partly** | **No** | **Don’t know** |
| --- | --- | --- | --- | --- | --- |
| **4.4.1** | **Financial Planning** |  |  |  |  |
|  | Does the Business do financial planning? |  |  |  |  |
|  | Is the business working capital position sufficient? |  |  |  |  |
|  | Does the business constantly make profits? |  |  |  |  |
|  | Does the business have good relationships with its creditors |  |  |  |  |
| **4.4.2** | **Bookkeeping and Accounting** |  |  |  |  |
|  | Does your business keep accounting books (purchase, sales, stock, cash book)? |  |  |  |  |
|  | Are accounting records easy to access? |  |  |  |  |
| **4.4.3** | **Budgeting** |  |  |  |  |
|  | Has the business established financial goals? |  |  |  |  |
|  | Does the business use a cash flow budget to make financial decision? |  |  |  |  |
|  | Are capital equipment purchases budgeted? |  |  |  |  |
|  | Is there a match between the business’s sources and use of funds? |  |  |  |  |
|  | Does the business use the budget to control the costs? |  |  |  |  |
| **4.4.5** | **Credit Collection** |  |  |  |  |
|  | Does the business use credit to increase revenues? |  |  |  |  |
|  | Does the business know its credit and collection costs? |  |  |  |  |
|  | Does the business have a credit policy? |  |  |  |  |
|  | Is the current credit policy successful? |  |  |  |  |
|  | Does the business review its credit and collection policies regularly? |  |  |  |  |
| **4.4.6** | **Dealing with Banks and Other Financial Institutions** |  |  |  |  |
|  | Does the business have a good relationship with financial institutions? |  |  |  |  |
|  | Does the business maintain a bank account? |  |  |  |  |
| **4.4.7** | **Financial Compliance** |  |  |  |  |
|  | Does the business produce monthly P&Ls (income statements)? |  |  |  |  |
|  | Does the business know and use balance sheets? |  |  |  |  |
|  | Does the business know and use any ratio analysis? |  |  |  |  |
|  | Does your business produce Management accounts? |  |  |  |  |
|  | Does your business submit tax returns? |  |  |  |  |
|  | Does your business submit PACRA returns and others? |  |  |  |  |

**4.5. STRATEGIC MANAGEMENT**

| **#** | **Item** | **Yes** | **Partly** | **No** |
| --- | --- | --- | --- | --- |
| **4.5.1** | **Strategic Management** |  |  |  |
|  | Are your business goals clear and measurable? |  |  |  |
|  | Are the goals communicated to your staff? |  |  |  |
|  | Does the business have an organizational structure? |  |  |  |
|  | Has the business developed its vision / Mission? |  |  |  |
|  | Has the business developed its value statement(s)? |  |  |  |
| **4.5.2** | **Leadership and Governance** |  |  |  |
|  | Does the business have a ready succession plan? |  |  |  |
|  | Does the business have a business / strategic plan? |  |  |  |
|  | Does the business hold management meetings regularly? |  |  |  |
|  | Does the business have and use an accountant, attorney, business consultant? |  |  |  |
|  | Does the Business use outside technical advisors? |  |  |  |

**4.6.. HUMAN RESOURCES**

| **#** | **Item** | **Yes** | **Partly** | **No** |
| --- | --- | --- | --- | --- |
| **4.6.1** | **Hiring** |  |  |  |
|  | Does the business maintain H.R files of employees? |  |  |  |
|  | Does the business have clear job descriptions for employees? |  |  |  |
|  | Does the business has written conditions of service for employees |  |  |  |
|  | Does the Business conduct employee appraisals? |  |  |  |

**4.7. INFORMATION SYSTEM/ INFORMATON TECHNOLOGY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Item** | **Yes** | **Partly** | **No** |
| **4.7.1** | Is the business computerized? |  |  |  |
|  | Does the business have an information system? |  |  |  |
|  | Is the information system computerized? |  |  |  |
|  | Is information updated regularly? |  |  |  |
|  | Is the business’s information system secure (backed-up)? |  |  |  |

**SECTION 5: BUSINESS ASSETS**

**6.1** Do you have physical assets? 1. No 2. Yes

**6.2** List down the business assets you have.

|  |  |  |
| --- | --- | --- |
|  | **Item** |  |
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**8.1** Is your business presently participating in a mentorship / capacity building programme with any organization?

**1.** No **2.** Yes

**8.2** If yes, are you satisfied with the mentorship / capacity building sessions? 1**.** No 2**.** Yes

**8.3** How would you rate your technical capacity of your business presently?

**1.** Very good **2.** Good **3.** Average **4.** Poor