



Business Profile

Business Name: _____

Business Sector: _____

Address: _____

Office Phone: _____

Contact Person: _____

Mobile: _____ Email: _____

Mandate or Mission Statement:

List Programs/Services offered:

How many full/part time employees:

Number of clients/participants/customers served per month:

What are some short- term goals for your business?

What are some long- term goals for your business?

Is there anything preventing you from achieving these goals?

What does success look like for you?

Other ideas/comments/suggestions on how retirees can contribute to the success of your business:

Contact Signature: _____ Date: _____