

Our organization is committed to evaluating success based on the effect we have on our clients. Please help us provide you with more effective services in the future by sharing your feedback with us.

Your participation is greatly appreciated. Thank you for your time.

***As you respond, please keep these projects in mind. Ongoing or recently closed projects may not be listed. Please keep those in mind as well.***

| <b><i>Project</i></b>        | <b><i>Our Project Manager(s)</i></b> | <b><i>Other Service Provider (if any)</i></b> | <b><i>Dates</i></b> |
|------------------------------|--------------------------------------|---|---------------------|
| <i>Enterprise Assessment</i> |                                      |   |                     |
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To better assist you and other clients in the future, we need your feedback to evaluate the effectiveness and impact of the services we provided to your company. Your participation is voluntary and your responses are held entirely in confidence.

This survey is underwritten by the Manufacturing Extension Partnership at the National Institute of Standards and Technology (NIST), which provides funding for local manufacturing extension programs throughout the United States and Puerto Rico. Your comments provide us with important information to judge the quality and usefulness of our services.

This questionnaire contains collection of information requirements subject to the Paperwork Reduction Act (PRA). Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subject to penalty for failure to comply with, a collection of information subject to the requirements of the PRA, unless that collection of information displays a currently valid OMB Control Number. The estimated response time for this questionnaire is 8 minutes. The response time includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

***The OMB Control No. is 0693-0021 Expiration 10/31/2017***

1. What were the **two** most important factors for your firm choosing to work with the Center X?

- Center/staff Expertise
- Cost/price of services
- Fair and unbiased advice/services
- Reputation for results
- Knowledge of your industry
- Specific services not available from other providers
- Lack of other providers nearby
- Other (specify) \_\_\_\_\_
- Don't know
- Refused to answer

2. In addition to Center X, has your company used any other external resources/providers to address business performance issues over the past 12 months?

1 Yes 2 No 8 Don't know 9 Refused to answer

3. As you look forward over the next 3 years, what do you see as your company's **three** most important strategic challenges?

- Product innovation/development
- Identifying growth opportunities
- Ongoing continuous improvement/cost reduction strategies
- Employee recruitment and retention
- Financing
- Exporting/Global engagement
- Sustainability in products and processes
- Managing partners and suppliers
- Technology needs
- Other (specify) \_\_\_\_\_
- Don't know
- Refused to answer

4. Did the services you received directly lead to an increase in sales at your establishment over the past 12 months?

1 Yes How much? \$ \_\_\_\_\_

2 No 8 Don't know 9 Refused to answer

5. Over the past 12 months, did the services you received directly lead you to retain sales that would have otherwise been lost?

1 Yes How much? \$ \_\_\_\_\_

2 No 8 Don't know 9 Refused to answer

6. Did the services you received directly lead you to create any jobs over the past 12 months?

1 Yes How many? \_\_\_\_\_

2 No 8 Don't know 9 Refused to answer

7. Did the services you received lead you to retain any jobs over the past 12 months?

- 1 Yes      How many? \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

8 Did the services you received directly result in cost savings in labor, materials, energy, overhead, or other areas over what would otherwise have been spent in the past 12 months?

- 1 Yes      How much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

9 As a result of the services you received, has your establishment increased its investment over the past 12 months in:

a. New products or processes?

- 1 Yes      How Much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

b. Plant or equipment?

- 1 Yes      How Much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

c. Information systems or software?

- 1 Yes      How much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

d. Workforce practices or employee skills?

- 1 Yes      How much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

e. Other areas of business?

- 1 Yes      How much? \$ \_\_\_\_\_  
 2 No      8 Don't know      9 Refused to answer

10 As a result of the services you received, did your establishment avoid any unnecessary investments or save on any investments in the past 12 months?

1. Yes      How much was saved/avoided? \$ \_\_\_\_\_  
 2. No      8 Don't know      9 Refused to answer

11 Based on the benefits that resulted from the services provided, how likely would you be to recommend this MEP Center to other companies, assuming **they** are not direct competitors?

**0 (Not at all Likely) ←-----→ 5 ←-----→ (Very Likely) 10**

**If you did not give a score of "10" what one thing could the MEP Center have done to improve their score?**

12 Do you have any suggestions or comments for the Center?

13 For analytical purposes, we would like to verify who completed this survey.

What is your job title?

What is your name?