

**GENERAL INFORMATION**

First & Last Name

Email

Company/Business Name

Website

**ADDRESS**

Street Address

City

ZIP/Postal Code

Phone

Address Line 2

State/Province/Region

Country

Fax

**COMPANY ADDRESS** *(if different from above)*

Street Address

City

ZIP/Postal Code

Phone

Address Line 2

State/Province/Region

Country

Fax

## DATABASE

How many records or contacts are in your database?

Do you collect contact information from every single prospective client/customer?

Yes  No

What percentage of gross revenue comes directly from your database?

What type of information is recorded?

Where do you store this information?

Is this information segmented?

What is the average revenue per contact?

How many new records or contacts would you like to acquire in one year?

## WEBSITE DESIGN

Does the overall scheme, including any and all images, colours, tones and fonts used, accurately depict your brand?

Is it easy to navigate and find information?

**WEBSITE DESIGN** *Continued*

Does it load quickly and is it compatible in various browsers and responsive to screen size?

**WEBSITE CONTENT** *Please check all the features that apply to your current website*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Calls to Action <i>(read more, subscribe, etc.)</i> | <input type="checkbox"/> Blog                   | <input type="checkbox"/> Testimonials           |
| <input type="checkbox"/> Footer  | <input type="checkbox"/> Search Button          | <input type="checkbox"/> Video Capability       |
| <input type="checkbox"/> Images/Infographics                                 | <input type="checkbox"/> Quick Navigation Links | <input type="checkbox"/> Data Capture/Subscribe |
| <input type="checkbox"/> Visit & Traffic Analytics                           | <input type="checkbox"/> SEO/Search Optimized   | <input type="checkbox"/> Multiple Landing Pages |
| <input type="checkbox"/> Database Integration                                | <input type="checkbox"/> Mobile Friendly        | <input type="checkbox"/> Reviews                |
| <input type="checkbox"/> Assessment/Evaluations                              | <input type="checkbox"/> Contests/Polls         | <input type="checkbox"/> Social Media           |

**ONLINE MARKETING**

Which online tools are you currently using to communicate with your clients?

- |                                    |                                     |                                    |
|------------------------------------|-------------------------------------|------------------------------------|
| <input type="checkbox"/> Facebook  | <input type="checkbox"/> Twitter    | <input type="checkbox"/> Instagram |
| <input type="checkbox"/> Pinterest | <input type="checkbox"/> YouTube    | <input type="checkbox"/> Google+   |
| <input type="checkbox"/> LinkedIn  | <input type="checkbox"/> Foursquare | <input type="checkbox"/> Email     |

Frequency

- |                                     |                                  |                                    |
|-------------------------------------|----------------------------------|------------------------------------|
| <input type="checkbox"/> Infrequent | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly |
| <input type="checkbox"/> Yearly     | <input type="checkbox"/> Never   |                                    |

Content

- |                                     |  |                                    |
|-------------------------------------|--|------------------------------------|
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Service/Product Education | <input type="checkbox"/> Community |
| <input type="checkbox"/> Events     | <input type="checkbox"/> Other                     |                                    |

**OFFLINE MARKETING: PRINT**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Flyers                | <input type="checkbox"/> Brochures               | <input type="checkbox"/> Catalogues        |
| <input type="checkbox"/> Signs                 | <input type="checkbox"/> Business Cards          | <input type="checkbox"/> Paid Ads          |
| <input type="checkbox"/> Direct Mail           | <input type="checkbox"/> Truck/Car/Window Decals | <input type="checkbox"/> Promotional Items |
| <input type="checkbox"/> Tradeshow/Conferences | <input type="checkbox"/> Other:                  |  |

**OFFLINE MARKETING: EVENTS**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Grand Opening              | <input type="checkbox"/> Seasonal Sales | <input type="checkbox"/> Product Launch    |
| <input type="checkbox"/> Charity Fundraiser         | <input type="checkbox"/> Networking     | <input type="checkbox"/> Contest/Challenge |
| <input type="checkbox"/> Client Awards/Appreciation | <input type="checkbox"/> Other:         |  |

**ANALYTICS**

What type of analytical and report data do you have that allows you to properly evaluate and determine the effectiveness of advertising and marketing efforts?

**REGULAR AUDIT & MAINTENANCE**

How often do you review and edit your marketing collateral to ensure everything is up to date?

- Monthly
  Quarterly
  Annually
  Never

How often do you conduct a marketing and advertising budget audit to determine what new needs you have and how to fulfill them?

- Monthly
  Quarterly
  Annually
  Never

*Thank you for completing our eMarketing Assessment Form.*

*An Account Director will be in touch with you within the next 24 -48 hours.*

*We look forward to speaking with you further!*

**SUBMIT FORM**