

Initial Business Needs Assessment

Flash Member Number:	
Organisation Name:	
Number of Years Trading:	

Business Description:			
Organisation Structure:			
<i>Breakdown of the number of staff across business broken down into functions.</i>			
Number of Managers/Office Staff		Number of Operatives:	
Current State of Business Against the Last 5 Years of Operation:			
Business Strengths:			

Business Challenges:

--

Summary of Business Objectives over the next 5 Years:

--

Signed: _____

Dated: _____