Questionnaire

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| Your company name |  |
| The main activity area is the following |  |
| Actual address |  |
| Name of the CEO |  |
| Contact person | |  |  | | --- | --- | | NAME |  | | Position |  | | Phone |  | | E–mail |  | |
| Site |  |
| Time of activity of your company in the market |  |
| Number of employees of your company |  |
| What do you think are the strengths of your company |  |

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