

Client Name (Person completing the form)		Company Name	
Phone	Email		
Street Address/PO Box	City	State	Zip
Client Signature		Date:	
Briefly describe your product or service:			
Why do customers need your product:			
Who buys or uses your product or service:			
What are the related industries that need your product or service:			
In which market(s) do you seek to do business:			
What is the estimated market size (dollars and units if known):			
What is estimated market growth:			
Are there any potential existing markets and/or possible emerging markets:			
Who is your direct competition:			

Export Market Research Questionnaire

What alternatives are available:

What is your competitive advantage:

What are the barriers to entry for other companies seeking to do what you do:

Industry structure:

Concentration (rivalry among competitors):	Many firms	A few firms	Two firms	One Firm
Entry and Exit Barriers (threat of new entrants/substitutes):	No barriers	Significant barriers	High barriers	

List factors that affect industry growth:

What are the relevant standards or regulations affecting your product or industry:

Is the industry sensitive to economic fluctuations:

What would you like to know more about:

IMPORTANT! BEFORE YOU CLOSE FILE

1. SAVE completed form to your computer (File → Save As → Pick folder → Name file)
2. ATTACH saved file to email and send to: jnicholcaddy@unomaha.edu
3. If you have a problem using form or do not hear from a consultant within five business days, call 402-554-4092