

Market Research Questionnaire

PART I: CLIENT INFORMATION

1. Client Name (Name of the person completing the form)	2. Company Name		
3. Telephone Primary	4. Email		
5. Street Address/PO Box	6. City	7. State	8. Zip
9. Market research to be performed for (please check) SBIR STTR Other I If you are applying for SBIR/STTR, which agency and what is the application deadline?			
10. Client Signature		11. Date:	

PART II: MARKET INFO (Please answer to the best of your knowledge)

SECTION I: General Information About Your Market
12. Briefly describe your idea/technology:
12a. What is the customer need (is there a need for your invention/product)?
12b. Who is your target market (who will be buying/using your product/service)?



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12c. What is the estimated market size (dollars and units if known)?

12d. What is estimated market growth?

12e. Are there any other potential existing markets and/or possible emerging markets?

SECTION II: Competition (For each of the competition type listed below, please describe what is their product/strategy and what stage their product is in i.e. development, production, on the market)

13a. Who is your direct competition?

13b. Who is your indirect competition?



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13c. Who is your future competition?
SECTION III: Competitive Advantage
14a. What is your competitive advantage?
14b. What are the barriers to entry?
14c. How are you protecting your Intellectual Property?
SECTION IV: Industry Trends
15a. Industry Structure:
Concentration (rivalry among competitors) 🗌 Many firms 📄 A few firms 📄 Two firms 📄 One firm
Entry and Exit Barriers (Threat of new entrants and substitutes) 🗌 No barriers 🗌 Significant barriers 🗌 High barriers
15b. List factors that affect industry growth:
15c. Are there any governmental and/or legal regulations?



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15d. Is the industry sensitive to economics fluctuations?

PART III: BUSINESS OR COMMERCIALIZATION STRATEGY

SECTION I: Business or Commercialization Strategy

16. What is your business or commercialization strategy?

PART IV: MARKET RESEARCH QUESTIONS

17. What would you like to know more about?

IMPORTANT! BEFORE YOU CLOSE FILE

- 1. SAVE completed form to your computer (File \rightarrow Save As \rightarrow Pick folder \rightarrow Name file
- 2. ATTACH saved file to email and send to: inicholcaddy@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