

## Business Survey

Date: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Street Address: \_\_\_\_\_

Room/Suite Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ FAX: (     ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

*Note: If your business has more than one local location, include the additional location(s) at the end of the survey.*

1. Mission and/or purpose of your company and its philanthropic interest:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Number of employees in local community: \_\_\_\_\_

3. Charitable contribution provided by your company last year (estimate): \$ \_\_\_\_\_

4. Volunteer hours contributed by your company last year (estimate): \_\_\_\_\_

5. Does your company allow time off for volunteer work? (CHECK ONE)

<sub>1</sub> Yes

<sub>2</sub> No

6. Does your company offer an Employee Assistance Program (EAP)? (CHECK ONE)

<sub>1</sub> Yes

<sub>2</sub> No

7. Does your company offer child care services to employees? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

8. Does your company provide meeting space to community groups? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

9. Does your company make materials and equipment, such as duplicating machines or computers, available to community groups? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

10. Are employees with specific skills made available to help community groups, for example, a strategic planner who helps a community-based group develop a strategic plan? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

11. Does your company reach out to purchase goods and services from enterprises in lower income areas, for example, enterprises that are part of community revitalization efforts? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

12. Does your company reach out to hire people from distressed neighborhoods, for example, people who are trying to transition from welfare to work? (CHECK ONE)

- <sub>1</sub> Yes
- <sub>2</sub> No

13. In what other ways has your company helped to improve local quality of life in the last year? (BRIEFLY DESCRIBE)

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14. For each of the following community initiatives or projects related to health and human services *or* community and economic development in distressed areas, please check the appropriate box(es). (CHECK ALL THAT APPLY)

Community Initiative/Project	A. Your Company is Currently Leading or Participating in	B. Your Company Would Like to Become a Leader or Participant in
a. Preparing people for jobs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Increasing availability of and access to jobs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Fostering entrepreneurship	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Promoting economic development in distressed areas	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Promoting commercial revitalization in lower income areas	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Fostering commercial real estate improvement in lower income neighborhoods	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Expanding business and industrial development in distressed areas	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. Promoting educational reform	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
i. Promoting good health	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
j. Increasing affordable housing and home ownership	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
k. Promoting youth development	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
l. Increasing availability of recreation opportunities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
m. Promoting arts and culture	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
n. Increasing neighborhood safety	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
o. Fostering racial harmony	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
p. Promoting volunteering	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
q. Fostering community networks	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
r. Connecting neighbors who need help with those who can help	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
s. Building neighborhood trust	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
t. Improving access to transportation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
u. Beautifying community spaces	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
v. Designing a plan for community renewal	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
w. Other (Please specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
x. Other (Please specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

15. How would your company *most* like to, or how does it plan to, be more involved in improving the community? (BRIEFLY DESCRIBE)

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**Other Local Location(s)**

Street Address: \_\_\_\_\_

Room/Suite Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ FAX: (     ) \_\_\_\_\_

*(Add sheets if necessary)*

**THANK YOU**

Please return this survey to United Way of Knox County, Inc. at  
106 West Ohio Avenue, Mount Vernon, OH 43050 by July 9, 2004.  
Fax 740-397-5762

Should you have any questions, please contact us at 397-5721.