



P.O Box 2396  
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www.justeconomicswnc.org

## Section 1: Certification Eligibility

1. How is employee compensation currently determined?  
\_\_\_\_\_
2. What is the total size of your workforce? \_\_\_\_\_
3. Do all full and part time employees receive a living wage (for Buncombe and Transylvania Counties, \$11.35/hour without benefits or \$9.85/hour with employee provided health insurance)?    Yes    No
4. How many employees earn below the living wage as defined above? \_\_\_\_\_
5. What does the lowest paid employee earn per hour?    \$\_\_\_\_\_ /hour
6. Do you have tools/policies in place to determine employee raises and promotions?    Yes    No
7. Which of the following benefits and supplementary services are offered to employees? *Check all that apply*
  - a. \_\_\_\_\_ Health Insurance - \_\_\_\_% Paid by Employer
  - b. \_\_\_\_\_ Dental Insurance - \_\_\_\_% Paid by Employer
  - c. \_\_\_\_\_ Life insurance - \_\_\_\_% Paid by Employer
  - d. \_\_\_\_\_ Paid Vacation - \_\_\_\_ days per year
  - e. \_\_\_\_\_ Paid Sick Days - \_\_\_\_\_ days per year
  - f. \_\_\_\_\_ Childcare - \_\_\_ On-site \_\_\_ Off-site
  - g. \_\_\_\_\_ Non-medical sabbatical/leave of absence - \_\_\_\_\_ *Please describe*
  - h. \_\_\_\_\_ Maternity/Paternity Leave - \_\_\_\_\_ *Please describe*
  - i. \_\_\_\_\_ Retirement plan (Pension, 401K, etc) - \_\_\_\_\_ *Please describe*
  - j. \_\_\_\_\_ Health & Wellness Program - \_\_\_\_\_ *Please describe*
  - k. \_\_\_\_\_ Counseling Services - \_\_\_\_\_ *Please describe*
  - l. \_\_\_\_\_ Continuing Education Reimbursement - \_\_\_\_\_ *Please describe*
  - m. \_\_\_\_\_ Opportunities for professional development - \_\_\_\_\_ *Please describe*
  - n. \_\_\_\_\_ Other: \_\_\_\_\_ *Please describe*



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## Section 2: Additional Information

8. What is the total cost to your business for a new hire? \_\_\_\_\_ (Please estimate)
9. How much do you spend on average on advertising for recruitment purposes only per year? \$ \_\_\_\_\_
10. How much do you spend to train a new employee? \_\_\_\_\_ (Please estimate)
11. How many positions do you recruit for, on average, during a year? \_\_\_\_\_
12. What is your average employee turn over rate per year? \_\_\_\_\_
13. How much do you spend on the following forms of advertising each month?
  - a. Print (newspaper, magazine, catalogs, directory) \$\_\_\_\_\_/month
  - b. On-line (pay per click, Google ad words, banner) \$\_\_\_\_\_/month
  - c. Radio/TV (program underwriting, commercials) \$\_\_\_\_\_/month
  - d. Networking/trade shows/special events \$\_\_\_\_\_/month
14. Do you advertise in feeder markets?    Yes    No
15. Do you have regular publicity in media outlets?    Yes    No
16. Is your business a member of any of the following groups? *Check all that apply*
  - a. \_\_\_\_\_ Chamber of Commerce
  - b. \_\_\_\_\_ Convention and Visitors Bureau
  - c. \_\_\_\_\_ Mountain BizWorks
  - d. \_\_\_\_\_ Other \_\_\_\_\_ *Please specify*
17. Is there a local purchasing strategy or policy in place?    Yes    No
18. What percentage of expenditures (other than labor) are from local supplies (within 300 mile radius)? \_\_\_\_\_%
19. What is the biggest challenge your business faces?  
\_\_\_\_\_
20. What would allow your business to be more successful? *Check all that apply*
  - a. \_\_\_\_\_ Free advertising in local media outlets
  - b. \_\_\_\_\_ Seminars on topics related to business development
  - c. \_\_\_\_\_ Discounted membership to business associations
  - d. \_\_\_\_\_ Networking opportunities with other local business owners
  - e. \_\_\_\_\_ Other \_\_\_\_\_ *Please specify*