

Business Advisory Service Programme - Bulgaria

CONSULTING COMPANY INFORMATION

CONSULTANT INFORMATION

Name of company: _____	
Address: _____	e-mail: _____
Telephones: _____	Fax: _____
President/contact person: _____	
<u>Employment information:</u>	
Number of full-time consultants: _____	Number of part-time consultants: _____
Number of consultants (total): _____	Number of employees (total): _____
Other _____	

<u>Resources:</u>	
Space: _____	
Main equipment: _____	

Other _____	

AREAS OF EXPERTISE

Area of expertise No. 1: _____

Clients consulted in last 2 years:
Client No. 1: _____
Assistance provided: _____

Dates: _____
Client No. 2: _____
Assistance provided: _____

Dates: _____
Client No. 3: _____
Assistance provided: _____

Dates: _____

Area of expertise No. 2: _____

Clients consulted in last 2 years:

Client No. 1: _____

Assistance provided: _____

Dates: _____

Client No. 2: _____

Assistance provided: _____

Dates: _____

Client No. 3: _____

Assistance provided: _____

Dates: _____

Area of expertise No. 3: _____

Clients consulted in last 2 years:

Client No. 1: _____

Assistance provided: _____

Dates: _____

Client No. 2: _____

Assistance provided: _____

Dates: _____

Client No. 3: _____

Assistance provided: _____

Dates: _____

Other: _____

Information submitted by: _____ Date: _____

Note: the information provided will be treated as strictly confidential by the Programme.