



Growth Services

Grow Smarter. Not Just Bigger.

Client Intake Questionnaire

Question. Qualify. Quantify.

Instructions

Please complete this questionnaire as thoroughly as possible prior to your Discovery Session. Your responses help us understand your current landscape and tailor our assessment to your specific needs.

If a question does not apply, please write "N/A". If you are unsure, provide your best estimate — we will validate all data during our assessment phase.

Estimated completion time: 30–45 minutes

Building smarter, more resilient systems by aligning technology, people and strategy. Unleashing potential at every level.

CONFIDENTIAL

Section A: Company Information

Company Name:

Primary Contact:

Title / Role:

Email:

Phone:

Website URL:

Industry / Vertical:

Year Founded:

Number of Employees:

Headquarters:

Other Locations:

Company Description (1–2 sentences):

Section B: Revenue & Business Model

What is your primary business model? (check all that apply)

☐ B2B

☐ B2C

☐ SaaS / Subscription

☐ Professional Services

☐ E-Commerce / Product Sales

☐ Marketplace / Platform

☐ Other

Current Annual Revenue
(approx.):

Revenue Growth Rate
(YoY):

Average Deal Size:

Customer Lifetime Value:

Current Customer Count:

Customer Retention Rate:

Top 3 revenue streams and approximate percentage each represents:

Revenue target for the next 12 months:

Section C: Marketing & Digital Presence

Which marketing channels are you currently using? (check all that apply)

☐ Company Website

☐ SEO / Organic Search

☐ Paid Search (Google/Bing Ads)

☐ Social Media (organic)

☐ Social Media (paid)

☐ Email Marketing

☐ Content Marketing

☐ Events / Trade Shows

☐ Referral / Word-of-Mouth

☐ Partnerships / Affiliates

☐ Cold Outreach (email, phone, LinkedIn)

☐ Other

Monthly Marketing
Budget: _____

Monthly Website Visitors: _____

Website Conversion Rate: _____

Primary Lead Source: _____

When was your website last redesigned or significantly updated?

Do you have a documented content strategy or editorial calendar? If yes, describe:

Marketing analytics tools currently in use:

Section D: Search & Discoverability (SEO / AEO)

Do you currently invest in SEO? In-house or agency?

Top 5 target keywords or search phrases:

Do you rank on page 1 of Google for any meaningful keywords?

Are you familiar with AI Engine Optimization (AEO)? Is your brand appearing in AI search results?

Do you have a Google Business Profile and active local SEO strategy?

Section E: Sales & Pipeline

Sales Team Size: _____

CRM Platform: _____

Avg Sales Cycle Length: _____

Current Win Rate: _____

Monthly Qualified Leads: _____

Monthly New Customers: _____

Describe your current sales process from lead to close (even if informal):

Do you have a documented sales playbook or SOPs?

Biggest challenge in converting leads to customers:

Do you do any outbound prospecting (cold calls, cold emails, LinkedIn)?

Section F: Competitive Landscape

Top 3–5 competitors (include websites if possible):

What differentiates your company from competitors?

Competitors whose marketing, sales, or digital presence you admire — what do they do well?

Section G: Technology Stack & Tools

Which tools/platforms do you currently use? (check all that apply)

■ CRM (Salesforce, HubSpot, etc.)

■ Marketing Automation

■ Website Platform

■ Analytics (GA, Mixpanel, etc.)

■ Project Management

■ Communication (Slack, Teams)

■ Accounting / ERP

Tools you feel you are underutilizing or not well integrated:

Are you using or interested in AI tools for marketing, sales, or operations?

Section H: Goals, Priorities & Expectations

Top 3 business growth priorities for the next 12 months:

What does success look like for this engagement? How will you measure it?

Urgency Assessment — Rate 1 (Not Urgent) to 5 (Critical):

	1	2	3	4	5
Website / Digital Presence	■	■	■	■	■
SEO / Search Visibility	■	■	■	■	■
Lead Generation / Pipeline	■	■	■	■	■
Sales Process / CRM	■	■	■	■	■
Revenue Growth / Pricing	■	■	■	■	■
Brand / Content / Positioning	■	■	■	■	■

Anything else you would like the rethinQ team to know before our Discovery Session?

Authorization & Sign-Off

By signing below, I confirm that the information provided is accurate to the best of my knowledge. I authorize rethinQ Solutions to use the information and access the platforms referenced in this document for the purposes of our engagement.

Signature:

Date:

Printed Name:

Title:
