



Social Media Strategy Assessment

Please fill out this form as completely as possible and e-mail to Kristen@KristenRDesign.com prior to session

Name: _____

Business: _____

Website: _____

Phone: _____

E-mail: _____

City, State (or location): _____

1. Briefly describe your business.

2. What is the biggest challenge with Social Media that you are facing right now?

3. What do you hope to accomplish with this strategy session?

Los Angeles, CA • Jacksonville, NC • Kaneohe, HI

E-mail: Info@KristenRDesign.com • (910) 378-0634



3. What have you done so far to get your Social Media campaign started?

4. Do you have a Facebook user account or Fan Page that you are currently using for your business and if so, what is the address? (Example: www.Facebook.com/username)

5. Are you currently using any of the following tools?

	Yes	No	
Google+	<input type="checkbox"/>	<input type="checkbox"/>	
Pinterest	<input type="checkbox"/>	<input type="checkbox"/>	if yes, Pinterest name: _____
LinkedIn	<input type="checkbox"/>	<input type="checkbox"/>	
Twitter	<input type="checkbox"/>	<input type="checkbox"/>	if yes, Twitter name: _____
YouTube	<input type="checkbox"/>	<input type="checkbox"/>	

6. What is your ultimate goal with your Social Media campaign – more customers, more exposure, automate your sales, etc?

7. Who do you consider to be your competitors? (specific or general)

Los Angeles, CA • Jacksonville, NC • Kaneohe, HI

E-mail: Info@KristenRDesign.com • (910) 378-0634



8. How much time have you been spending on your social media marketing? (Circle one)

1-2 hrs per week

3-4 hrs per week

5-6 hrs per week

6-8 hrs per week

Do you want to increase or decrease the amount of time that you are spending on social media?

9. Anything else we need to know to make this session successful for you?

Thank you and we look forward to working with you!

KR Design

Los Angeles, CA • Jacksonville, NC • Kaneohe, HI

E-mail: Info@KristenRDesign.com • (910) 378-0634