

## KEY QUESTIONS ON ENTREPRENEURIAL MOTIVATION

What is the main reason for you wanting to start your own business?

Have you experienced something in your corporate working environment that has made you uncomfortable or unhappy (e.g. bullying, politics, aggressive managers, etc.)?

How important is it for you to have control of your work and/or your work environment?  
Why is this?

How well do you work with other people? Is this a key reason for deciding to work for yourself?

What is the thing that you enjoy doing most as part of your work? Why?

What kinds of things create overload for you in the workplace?

How are you at business development or sales?

How are you at networking?

How are you with travelling?

What are your written communication skills like?

How are you when it comes to overload? Do you need to be isolated? What are your coping strategies? How can it affect other people?

Have you been told that you are very direct or too truthful? If so, how do you think this could be an issue (or not an issue) in your own business?

Do you have sensory issues such as hyper- or hyposensitive hearing, sight, smell, etc.? How could this be a consideration in starting your business, or in what your intended line of business is?

Have you found that there are things in your life that may cause you to get depressed (e.g. people disagreeing with you, too much isolation, too much interaction with people)? If yes, do you think this could potentially arise in the context of your business?

Are there any other areas which you think are very important to you which you need to make sure that you either incorporate into your business, or ensure your business allows you to cater for (e.g. compulsory behaviours, stimming, need for a breakaway area, need to have a 'dark room')?

Have you already considered a backup or contingency plan for when you may not be available to your business (e.g. through illness, holiday, etc.)?

## KEY QUESTIONS ON ENTREPRENEURIAL MOTIVATION

What is the main reason for you wanting to start your own business?

*In answering this question this time, do you think that some of the questions in the previous section may make you change your reasons for starting your own business somewhat? Make sure that you think about it and make sure that there are no underlying reasons for starting your business that you hadn't considered. Consider whether the question about experiences in the corporate environment may change your view somewhat.*

How important is it for you to have control of your work and/or your work environment? Why is this?

*The way you answered this question may determine whether you start a business where clients have a lot of control over things such as your time, your methods, what you produce. It may also make you consider some things you need to ensure you retain control of so that you do not get frustrated. Make a note of some of these, or any considerations relating to this.*

**How well do you work with other people? Is this a key reason for deciding to work for yourself?**

*Again, this may well determine the type of business you want to start, or the structure of the business. Do you need to think about getting a people manager? Do you need some coaching on dealing with people? Could this create a problem with clients? Make a note of what you could do to ensure that this is taken account of in your new business so that things work optimally.*

**What is the thing that you enjoy doing most as part of your work? Why?**

*Are you certain that your business idea will not interfere with you still being able to do what you enjoy the most? That may not necessarily be a particular task, but thinking about why you enjoy a particular task may give you some insights into other areas that may be important for you. Are there any areas of your business idea you need to refine in the light of these considerations?*

**What kinds of things create overload for you in the workplace?**

*Have you taken into consideration that this may be an issue in your business? Are these areas either eliminated or a coping strategy developed? Make a note of some of the strategies you have for the things you have identified that could arise in your own business.*

**How are you at business development or sales?**

*After having answered this question, do you have to make any adjustments to your new business idea, such as bringing someone in to assist you in this area? Or is it an identified area of development for you? Make a note of how this will affect your business idea.*

**How are you at networking?**

*After having answered this question, do you have to make any adjustments to your new business idea, such as bringing someone in to coach you in this area? Is it an identified area of development for you? How important will the networking be? Can you make use of social media? Make a note of how this will affect your business idea.*

**How are you with travelling?**

*Many people on the spectrum struggle with travelling and changes of venue. If you are starting your own business, will you be required to travel to client sites or other offices? Do you have coping mechanisms for this? Make a note of how this will influence your planning for your business.*

**What are your written communication skills like?**

*Sometimes people on the spectrum can have challenges with written communication, sometimes misinterpreting implications or being too direct. Will you be required to have a lot of written communication with clients, suppliers or staff? Is this an area you could benefit with support such as a personal assistant? Make a note of how this could affect your business model.*

**How are you when it comes to overload? Do you need to be isolated? What are your coping strategies? How can it affect other people?**

*Have you thought about any areas of your potential business that could aggravate your overloads? If you have, make a note of how you can change your business plans to accommodate or avoid this.*

**Have you been told that you are very direct or too truthful? If so, how do you think this could be an issue (or not an issue) in your own business?**

*As with written communication, sometimes people on the spectrum can annoy neurotypicals by being too truthful, ironic as that seems. Will you be required to have a lot of verbal communication with clients, suppliers or staff? Is this an area you could benefit with support such as a personal assistant? Make a note of how this could affect your business model.*



Do you have sensory issues such as hyper- or hyposensitive hearing, sight, smell, etc.? How could this be a consideration in starting your business, or in what your intended line of business is?

*Have you considered how your business idea could affect you as far as your sensitivities go? If so, what are you going to have to do to ensure it does not become an issue? Make some notes here.*

Have you found that there are things in your life that may cause you to get depressed (e.g. people disagreeing with you, too much isolation, too much interaction with people)? If yes, do you think this could potentially arise in the context of your business?

*What can you do to ensure that this does not occur, or if it does, that you have a coping strategy? Make some notes here.*

Are there any other areas that you think are very important to you that you need to make sure that you either incorporate into your business, or ensure your business allows you to cater for (e.g. compulsory behaviours, stimming, need for a breakaway area, need to have a 'dark room').

*Having considered the above, think about the practicalities of how you can deal with or incorporate the areas you identified and make some notes.*

Have you already considered a backup or contingency plan for when you may not be available to your business (e.g. through illness, holiday, etc.)?

*Do make sure that you think about cover for you. Much as we like to think we are, we actually are not supposed to work 24/7 365 days a year. All of us need a break, and we need to make sure we have a plan for that which does not create undue stress or concerns for us when the time draws near. Make a note of any thoughts you have had about this.*

Exercise Table 2.1

<b>Name of policies or procedures to discuss and agree</b>

Exercise Table 2.2

How many people will this affect in the business?	Is this required by law? If yes, which one?	Is this policy/procedure business critical?	Could this negatively impact on staff or managers? If yes, how?	Introduce the policy/process?	Owner	Name of policy or procedure

Exercise Table 3.1

<b>Function, department or system</b>	<b>In what way can you use this in your small business?</b>	<b>Is this an essential or a nice to have?</b>

Exercise Table 4.1

	1	2	3	4
	In your current job	As a start-up: first thoughts	As a start-up: thoughts after considering time	As a start-up: thoughts after considering knowledge
<b>Personal</b>				
Your pay (net)				
Spouse's pay (net)				
Other income				
<b>Total Personal Income</b>				
Mortgage/rent				
Vehicle costs				
Fuel				
Other transport costs				
Utilities				
Rates and taxes				
Telephone				
Internet				
Food and groceries				
Pet costs				
Insurances				
Clothes				
School fees				
Birthdays/holidays				
Entertainment				

	1	2	3	4
	In your current job	As a start-up: first thoughts	As a start-up: thoughts after considering time	As a start-up: thoughts after considering knowledge
Hobbies				
Gym				
Medical				
Credit cards and accounts				
Others				
1				
2				
3				
<b>Total Personal Expenses</b>				
<b>Business</b>				
Revenue (gross)	N/A			
Other business income	N/A			
<b>Total Business Income</b>				
Company taxes	N/A			
Office rental	N/A			
Company vehicle costs	N/A			
Company vehicle fuel	N/A			
Other transport costs	N/A			
Office furniture rental	N/A			
Computer equipment	N/A			
Office utility costs	N/A			
Office rates and taxes	N/A			
Telephones	N/A			
Internet	N/A			

	1	2	3	4
	In your current job	As a start-up: first thoughts	As a start-up: thoughts after considering time	As a start-up: thoughts after considering knowledge
IT software	N/A			
Marketing costs	N/A			
Advertising costs	N/A			
Insurances	N/A			
Salaries	N/A			
Employee benefits costs	N/A			
Other staff costs	N/A			
Stock	N/A			
Production costs	N/A			
Stationery costs	N/A			
Postage and printing costs	N/A			
Subscriptions/ professional membership	N/A			
Other operational costs	N/A			
1	N/A			
2	N/A			
3	N/A			



	1	2	3	4
	In your current job	As a start-up: first thoughts	As a start-up: thoughts after considering time	As a start-up: thoughts after considering knowledge
Total Business Expenses				
Personal And Business				
Total Income (Personal + Business) (A)				
Total Expenditure (Personal + Business) (B)				
Profit/Reserves (A-B)				

Exercise Table 4.2 Weekly Time Analysis

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>	<b>Sunday</b>
00:00							
01:00							
02:00							
03:00							
04:00							
05:00							
06:00							
07:00							
08:00							
09:00							
10:00							
11:00							
12:00							
13:00							
14:00							
15:00							
16:00							
17:00							
18:00							
19:00							
20:00							
21:00							
22:00							
23:00							

Exercise Table 4.4

<b>What knowledge do you and your business need to be successful in your market?</b> <i>Include the following considerations: technical; sector; business-related; personal</i>	<b>Do you have this knowledge?</b>	<b>Do you need to have this personally?</b>	<b>Does someone in your business have this knowledge?</b>	<b>Is it a gap?</b>	<b>If so, how will you fill it?</b>

Exercise Table 5.1

	I haven't considered it yet	I am thinking about it	I have made a decision	Notes/Final Decision
What type of business structure will suit my business best?				
What are the legal requirements associated with registering my company?				
Do I need to register for tax, and how do I do this?				
What business name should I use and how do I register it?				

<p>What sort of insurance do I need to obtain for myself and my business (e.g. professional indemnity, employer liability)</p>				
<p>Where should my office be based? Should it be a formal office or a virtual environment?</p>				
<p>What will be my staffing requirements? Will these be full-time or part-time posts? How do I go about recruiting them?</p>				
<p>Am I going to use an internal accounting and payroll system or am I going to outsource it? If so, what are the costs?</p>				

Exercise Table 6.1 Cash Flow Budget

	<b>Period 1</b>	<b>Period 2</b>	<b>Period 3</b>	<b>Period 4</b>
<b>Opening Balance</b>	0	Closing balance from Period 1	Closing balance from Period 2	Closing balance from Period 3
<b>Cash Income</b>				
Sales receipts				
Other income				
Other income				
<b>Total Cash Income</b>	Add all income figures	Add all income figures	Add all income figures	Add all income figures
<b>Cash Outgoings</b>				
Purchase of equipment				
Purchases of inventory				
Salaries and wages				
Human resources costs				
Water and electricity				
Telephones				
IT costs				
Rent and rates				
Cleaning and repairs				

	<b>Period 1</b>	<b>Period 2</b>	<b>Period 3</b>	<b>Period 4</b>
Marketing				
Printing and stationery				
Software				
PC/printer consumables				
Website costs				
Other office costs				
Post and packaging				
Insurance				
Vehicle costs				
Fuel				
Other travel costs				
Accommodation costs				
Subsistence				
Mileage payments				
Parking costs				
Advertising				
Legal fees				
Accountants fees				
Bank charges				
Interest payable				
Contingency amount				

Others				
<b>Total Cash Outgoings</b>	Add all outgoing figures	Add all outgoing figures	Add all outgoing figures	Add all outgoing figures
<b>Closing Balance</b>	Opening Balance + Total Cash Income: Cash Outgoing	Opening Balance + Total Cash Income: Cash Outgoing	Opening Balance + Total Cash Income: Cash Outgoing	Opening Balance + Total Cash Income: Cash Outgoing



# SAMPLE INVITATION TO TENDER DOCUMENT

**From:** xxx [the company]

**Address**

**To:** xxx [the tenderer]

**INVITATION TO TENDER/REQUEST FOR PROPOSAL –**

**CONTRACT NUMBER** [insert contract reference]

1. You are invited by the [company], to submit a tender for [insert title].
2. This ITT/RFP is confidential and proprietary to [company]. The material contained within it shall be treated as confidential by potential suppliers. The potential supplier shall use the information only for the purpose of preparing a response to this ITT. The information may not be used or shared with other parties for any purpose without [company's] prior consent.
3. Please read all the documents listed in the Form of Tender. Should your tender be accepted, these documents, your tender and any changes agreed in writing will form a binding contract between you and [company].
4. The contract will be for a period of [insert number] [weeks/months/years], beginning on xx/xx/xxxx unless extended or terminated according to the enclosed Terms of Reference.
5. If you do not wish to submit a tender, please return this covering letter using the addressed label which should be clearly marked '*No Tender*'. If you can state your reasons for not tendering this would be useful and may help to inform us on future procurements.
6. One original and [insert number] copies (so marked) of your tender and proposals, including any covering letter, will be required.
7. Tenders must be *delivered BY 12.00 HOURS ON* [insert date]. The tender document should be addressed to myself at the above address. Late tenders will not be admitted and it is your responsibility to ensure that your tender is received.
8. Any subsequent contract, if awarded, will be subject to the enclosed Terms of Reference.
9. You can obtain further information about contractual issues from myself (The Procurement Officer) at the above address, or from [insert name] at [insert address and phone number] for technical matters. Questions/clarifications on this ITT may be made before xx/xx/xx. The [Company] will summarise all the questions and responses and this will be made available to all potential suppliers.

## **Return procedure**

1. Please respond to all requirements.
2. Please return the completed prices schedule [and Form of Tender].
3. Tenders shall take the following format: *Lay out any specific format for the tender response, to make the evaluation easier e.g. the tender response must follow the headings in the specification.*

## Timetable summary

The Timetable is not binding and may be changed if circumstances so dictate.

Action	Date
Questions on ITT	
Return of tenders	
Notification to suppliers of evaluation	
Contract commencing	

## Optional

*Include either here, in the Specification or in a separate 'information required from you' sheet, any additional requirements for information such as:*

- Details of any proposed sub-contractors, including reasons for selection.
- Details of QA systems.
- Business or professional references.
- A method statement, explaining how you propose to plan and carry out the work. This should include details of your Quality Assurance Systems and how they will be applied to this contract.
- List of named personnel including CVs.
- References, preferably for similar work, for both your organisation and any individuals proposed for the contract, including full name, job title, address and telephone number of referees.
- Details of all three current, similar, contracts.

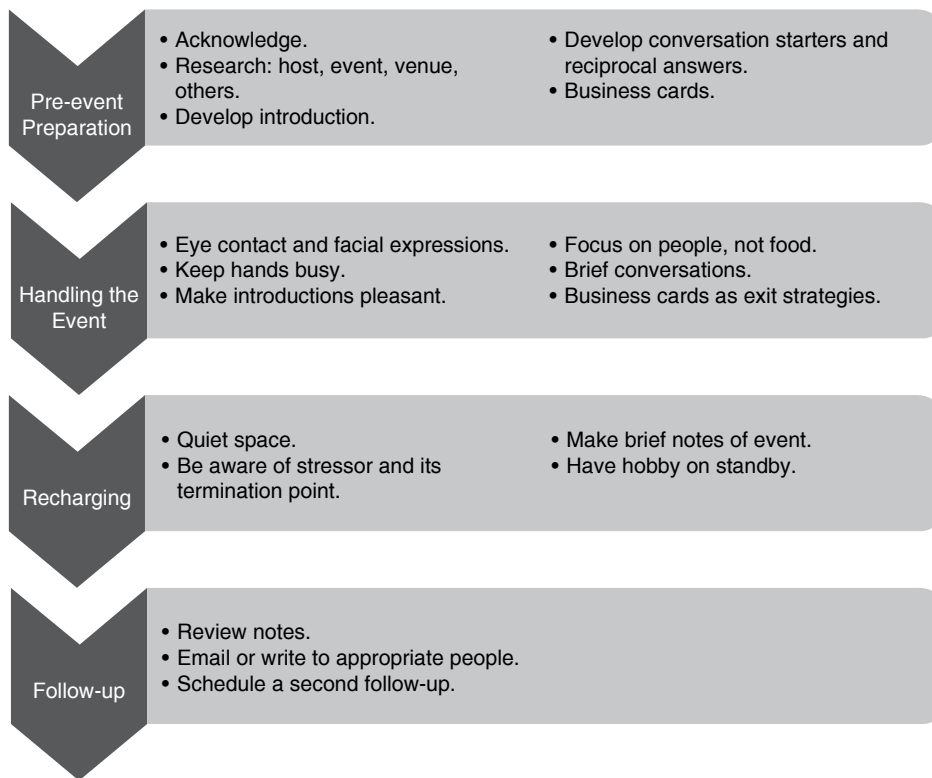
## Disclaimer

- The issuing of the ITT and any responses do not imply that [company] will enter into a contract or accept any proposal with any potential suppliers.
- The potential supplier is responsible for costs of any kind incurred in the response to this ITT.
- For goods: There is no guarantee of representation regarding the levels of business which [company] may place with a potential supplier. While [company] has used reasonable commercial endeavours in compiling this information, we do not warrant the accuracy of this information.
- By submitting a response to the ITT you are agreeing to be bound by the enclosed terms and conditions.
- The information set out in this ITT and accompanying documents has been compiled with care but does not necessarily represent with total accuracy the company's position and in the absence of fraud [company] shall have no liability in respect of the accuracy of any such information or any related representation or statement.
- The tenders shall be valid for a period of [number] months of the closing date of receipt of tenders.

## **Enclosed**

- [Form of tender].
- Specification/Requirements.
- Standard Terms and Conditions of Supply.

# NETWORKING FLOWCHART



Exercise Table 9.1

**Networking summary form**

Name of person

Organisation

Role in company

Contact details

How/where did I meet them (*i.e. did you meet during a coffee break, the dinner, were you seated together, etc.*)?

What did they look like?

What were some important things we discussed? *(Include important informal information.)*

Were there any positive impressions I gained?

Were there any negative impressions I gained?

Did we agree to follow-up formally or informally?

Do I want to follow-up?

Details of any follow-up

Exercise Table 10.1

<b>My key: Behavioural Indicators during Work</b>	<b>Does not apply</b>	<b>Mild or irregular</b>	<b>Quite often</b>	<b>Regularly</b>	<b>Almost all the time</b>	<b>Key problem area</b>
Aggression/overly assertive						
Isolating oneself						
Anxiety						
Depression						
Tantrums/outbursts						
Inability or difficulty making friends						
Problems with teamwork						
Problems with conversations (inappropriate comments, speaking too fast/slow, interrupting others, going off topic)						
Rituals or compulsory behaviours						
Specialist interest being focal						

Difficulties understanding other people's thoughts or reactions (mindblindness)						
Sensory hypersensitivities						
Poor co-ordination and/or balance						
Stimming behaviour						
Problems interpreting instructions (taking things too literally)						
Very blunt/matter of fact with opinions						
Problems with personal body language (lack of or inappropriate facial expressions, gestures or actions, inappropriate stimming)						
Problems interpreting body language in others						
Problems with eye contact						
Problems with proximity/personal space						



Hypervigilance						
Inability to focus on a task due to distractions						
Getting too caught up in the details of an assignment without being able to see the overview (e.g. writing a detailed essay but not being able to summarise it appropriately)						
Perfectionism (struggling to leave tasks until they are perfect)						
Difficulty with verbal directions or instructions						
Dependent on instructions; not being proactive						
Insistence of doing things your way and no other						
Problems multi-tasking						
Problems delegating						
Sensory overload						

Shutdown or deliberate isolation						
Others (detail)						

Exercise Table 10.2

<b>My Current Key Behavioural Indicators</b>	<b>How will changes in this area manifest?</b>	<b>Proposed practical coping strategies</b>
Aggression		
Isolating oneself		
Anxiety		
Depression		

Tantrums/outbursts			
Inability or difficulty making friends			
Problems with teamwork			
Problems with conversations (inappropriate comments, speaking too fast/slow, interrupting others, going off topic)			
Rituals or compulsory behaviours			

Specialist interest being focal			
Difficulties understanding other people's thoughts or reactions (mindblindness)			
Sensory hypersensitivities			
Poor co-ordination and/or balance			
Stimming behaviour			

Problems interpreting instructions (taking things too literally)			
Very blunt/matter of fact with opinions			
Problems with personal body language (lack of or inappropriate facial expressions, gestures or actions, inappropriate stimming)			
Problems interpreting body language in others			
Hypervigilance			

Problems with eye contact			
Problems with proximity/personal space			
Inability to focus on a task due to distractions			
Getting too caught up in the details of an assignment without being able to see the overview (e.g. writing a detailed essay but not being able to summarise it appropriately)			
Perfectionism (struggling to leave tasks until they are perfect)			

Difficulty with verbal directions or instructions			
Dependent on instructions; not being proactive			
Insistence of doing things your way and no other			
Problems multi-tasking			
Problems delegating			



Sensory overload				
Shutdown or deliberate isolation				
Others (detail)				