### **Customer Interview Sheet**

### **Customer Interview Sheet Format**

* **Customer Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date of Interview:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Interviewer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Interview Type (In-person/Phone/Email):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1. Background Information:**

* **Company/Organization Name (if applicable):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Position/Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Industry/Field:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Years of Experience/Engagement:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Needs & Challenges:**

* What challenges are you currently facing in your business/personal life? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How do you typically address these challenges? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What products or services are you currently using to solve these challenges? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Expectations & Goals:**

* What are your key expectations from the products/services you use? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What would make your experience better with the products/services you use? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Feedback on Product/Service:**

* What do you like the most about the product/service? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What improvements would you suggest? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Purchasing Behavior:**

* How often do you purchase related products/services? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What factors influence your buying decision the most? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Closing Remarks:**

* Any other feedback or thoughts you'd like to share? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_