

QUESTIONNAIRE

It is of particular importance for the development of the project to receive feedback from participating companies. In this questionnaire we would like to ask for your assessment of the effectiveness of the assistance you have been provided within our Innovation hub, after your participation is completed.

1. Full name of the representative:
2. Company name:
3. UIC:
- 4.1. Address:
- 4.2. Telephone:
- 4.3. E-mail:
- 4.4. Website:

- Did you receive the assistance which you had been looking for as part of your participation in this Innovation hub?

No Rather Not I Can Not Decide Rather Yes Yes

- How would you assess the assistance received?

Negative Rather Negative I Can Not Decide Rather Positive Positive

- Would you like to take part in future projects organized by FSC that focus on financial innovations?

Yes No

- What do you estimate being insufficient?

- How could we improve the Innovation hub?

Date:

Signature: