

Quiz Facts You Should Know about Each Member of Your Network

Select a Network Member with whom you are familiar and supply the following information about him or her. Try to complete the quiz within 15 minutes without help. Use your memory and any personal or professional resource at your disposal, such as directories, card files, notes and online data. If the correct response is "none" or "not applicable," write "none." If you don't know the answer, leave it blank. Score 4 points for each complete, correct answer, 2 points for each partial answer. Highest possible score: 100 points. This exercise is most valuable if you discuss the answers with the individual after you finish.

Name _____

Personal Information:	Points
A: _____ Nickname	_____
B: _____ Date and place of birth	_____
C: _____ A favorite color or food	_____
D: _____ Best friend (other than yourself)	_____
E: _____ Mentor/sponsor/role model/hero (other than yourself)	_____
F: _____ Favorite TV program, song or hobby	_____
G: _____ A personal award or recognition	_____
H: _____ Type of pet or vehicle	_____

Answer either the Employment or the Business/Enterprise section below:

Employment:	Points
I: _____ Name and location of current place of employment	_____
J: _____ Job title and at least one major duty	_____
K: _____ Name and title of current boss	_____
L: _____ Name of one co-worker	_____
M: _____ A work-related award achievement	_____
N: _____ Career objective or plan	_____
O: _____ Name and location of another company he or she has worked for	_____

Business/Enterprise:

Points

I. _____
Name and location of business

J. _____
Name, key benefits, features, and price of one product or service

K. _____
One type of individual or group in target market

L. _____
Major business issue/objective/problem

M. _____
Reason he or she decided to enter this business

N. _____
Number of years in this business or industry

O. _____
Name of a vendor, staff member, or client

Memberships:

Points

P. _____
One or more of the community groups, clubs, or organizations he or she has belonged to, office or position held, and name of at least one other member

Q. _____
One or more of the business associations or groups he or she has belonged to, office or position held, and name of at least one other member

Residence and Family:

Points

R. _____
City of Residence

S. _____
Home Phone Number

T. _____
Name, occupation of spouse/significant other

U. _____
No. children or siblings (and at least one name)

V. _____
parent's or guardian's name and occupation

Education:

Points

W. _____
Name at least one school attended (high school, college, vocational, etc.)

X. _____
Certificate, degree, credentials, license or special training received

Y. _____
Newspaper, magazine, news letter, other publication read regularly, or other publication read regularly for educational or information about events and opportunities

Total Points _____