PROFILER

PHYSICAL PRODUCT AND ECOMMERCE

ICP QUESTION GUIDE



DEMOGRAPHICS AND PERSONAL DATA

- What's your age group?
- What's your highest education level?
- What do you do for work?
- What's your gender?
- Are you married?
- Do you have children? What age groups are they in?
- Where do you live?
- Where do you do most of your shopping?
- What is your current financial status?
- Who in your family handles the finances?

MAJOR INFLUENCERS AND ONLINE BEHAVIOR

- Which social media platforms do you use every day?
- Which social media platforms do you use on a weekly basis?
- Where do you go for information to solve problems related to [type of product]?
- Where do you search for new [type of product]?

- Have you ever clicked on an online ad for a product? If so, did you purchase it?
- How would you search for a local store to buy [type of product]?
- Do you prefer to shop for [type of product] online or in-person?
- Has COVID-19 changed this preference?

PAIN POINTS

- How many times have you come across [a type of issue related to your product] that you couldn't solve on your own in the last year?
- What's your family's biggest challenge when it comes to [type of product]?
- Before purchasing [product], what was your biggest [type of product] challenge?
- Did you have a deadline to overcome that challenge?
- How has [your product] helped you overcome that challenge?

PRICE SENSITIVITY

- How much budget do you have for [type of product]?
- At what price would you consider [type of product] to be so expensive that you would not consider buying it?
- At what price would you consider [type of product] to be so cheap that you doubt the quality?

- At what price would you consider [type of product] to be somewhat expensive, but still an option?
- At what price would you consider [type of product] to be a great deal?
- How would you rate shipping costs from our store?

DECISION FACTORS AND PURCHASE PROCESS

- Where did you first hear about [product]?
- Why did you decide to purchase from us?
- Did you use another [type of product] provider before? If so, why did you switch?
- How did you decide what [type of product] you needed?
- How would you rate the checkout experience?
- How would you rate the shipping experience?

COMMON OBJECTIONS

• What main concerns did you have about purchasing [type of product]?

USE OF YOUR PRODUCTS

- How often do you use [type of product]?
- Who else in your family uses [type of product]? How often do they use it?

- What did you hope to accomplish when you purchased [type of product]?
- Did the product live up to your expectations?
- How does our [product] help your family?
- How does our [product] benefit you as an individual?
- How often do you purchase [type of product]?
- How often do you make purchases from our store?
- What are your favorite products?
- Which products didn't live up to your expectations?

