St.Peter's Engineering College – Technology Business Incubator Avadi,Chennai – 600 054

Please read this before filling in / Submitting the application

The information submitted by the applicant by filling this form is required by St.Peter's Engineering College – Technology Business Incubator (SPEC-TBI) to assess the suitability for providing incubation services. SPEC-TBI reserves the right to reject any proposal without assigning any reason . SPEC – TBI will treat the information provided as confidential. However, by signing and applying to SPEC-TBI for incubation assistance through this form, you agree not to make any claim or demand compensation in any form, at any point in time , now or any time in future , on the information and technology details provided by you . SPEC-TBI will not pay any compensation to you in any form for the delay in communicating the decision or rejecting the proposal.

For office use only Date Received

Reference # _____

Received by :_____

Founder Profile

1.Name of the founder : (1.If more than one list all the names 2.Enclose CV)		
2. Date of Birth & Age :		
3. Father Name :		
4. Phone Res :		Office :
5. Email :		
6. Permanent Address :		
7. Postal Address :		
8.Highest Educational Qualification :		
9.Year of passing	:	
10. Area of Specialization	:	
11. Name of the Institute / University	:	
12.Work Experience (List all the companies You have worked for Your job title , nature Of job and period of Service)	:	

Mob:

Concept of Product/Service

1. Briefly describe your product / Service

- 2. What is new about your technology?
- 3. How innovative is your idea vis-à-vis current technology ?
- 4. List all possible applications for your technology ?

Potential Market / Market Segment

- 1. What customer pain will your offering resolve ?
- 2. Who precisely are the customers having the the pain ?
- 3. Have you done market survey? If yes, briefly describe the method and results.

Competition in this market

- 1. How many players are operating already in this market?
- 2. Are there any entry barriers for a new entrant ?
- 3. Is it easy or difficult for substitute products to erode your market ?
- 4. Do you possess proprietary elements patents, trade secrets, etc that other firms Cannot likely duplicate or imitate? If yes, please give details.

Development stage / Plan

- 1. In which stage of development is your technology?
- 2. Is this technology owned by you or obtained from other sources ?
- 3. If your own, have you completed technology development? or what stage you are in the development process ? What is the estimated time required for completion of the development of technology?
- 4. What are the most important technological risks?

- 5. Do you need technology development and research assistance?
- 6. If technology for your project is provided by another lab or agency, please indicate the name of agency.
- 7. What is the arrangement you have made with the agency for technology transfer / royalty payment ?

Business Plan

If you have a business plan ready, please enclose the same.

Support from TBI

Minimum services expected from SPEC-TBI (Tick your choice)

- 1. Telephone
- 2. Fax
- 3. Shared laboratories access
- 4. Internet access
- 5. Conference rooms
- 6. Secretarial Services
- 7. Advisory Services
- 8. Legal Services
- 9. Accountancy services
- 10. Any other, pl specify _____

Other

Any other information you think relevant for review of your proposal.

References :

1.Name of the Referee	:
Organization/Designation	:
Address	:
Phone	:
E mail	:
2. Name of the Referee	:
Organization/ Designatio	n :
Address	:
Phone	:
E Mail	:

Declaration:

The information that I/We have provided is correct. I /We declare that I/We have read and understood and accepted the terms and conditions set forth in the disclaimer in the beginning of this application.

Signature Of Applicants

2.

3.

The completed application may be sent to The Project Manager, Technology Business Incubator St.Peter's Engineering College Avadi,Chennai – 600 054.

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