This application is to be used if you are applying to the UA NSF I-Corps Sites Program as a full team, specifically, an Academic Lead and an Entrepreneurial Lead together.

It is expected that UA NSF I-Corps Sites awardees will complete a 6 to 8 week course which will prepare you and your team to apply for the NSF I-Corps Teams program which provides funding of $50,000 to do deeper market and commercialization proof-of-concept work around your technology. NSF I-Corps Teams technologies have been 3 times more successful in securing NSF SBIR/STTR funding of $150,000. ***Only apply if you are interested in pursuing these higher impact funding opportunities.***

**Contact Information**

**Team Lead**

|  |  |
| --- | --- |
| *Name:* |  |
| *Phone Number:* |  |
| *Email Address:* |  |

**Other Team Member(s)** (if none, leave blank)

|  |  |
| --- | --- |
| *Name:* |  |
| *Phone Number:* |  |
| *Email Address:* |  |

**Description of Team**

|  |  |
| --- | --- |
| *Team Lead’s relevant business and technical experience (2-3 sentences):* |  |
| *Rest of Team’s relevant business and technical experience (2-3 sentences):* |  |

**Description of the Technology**

|  |  |
| --- | --- |
| *Patent Number(s) (if any):* |  |
| *One paragraph non-technical description of product or service (3-4 sentences):* |  |

**Commercial Potential**

The questions below are intended to serve as a baseline for the course. You are not expected to know specifically how the technology will be used. We merely want to get your initial ideas about potential.

|  |  |
| --- | --- |
| *How do you think this technology can be used as a marketable product or service?* |  |
| *Who do you think will buy the product or service?* |  |
| *What competitive advantages do you think the product or service has over those on the market?* |  |

**Business Mentor**

Have you identified a business mentor that you would like to work with on this project?

|  |
| --- |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes – I have a business mentor (complete information below) |  | No – Please assign me a business mentor |
|  |  |
|  |  |

|  |  |
| --- | --- |
| *Name:* |  |
| *Phone Number:* |  |
| *Email Address:* |  |
| *Relevant Business Experience:* |  |

**Participation in I-Corps Sites**

|  |  |
| --- | --- |
| *Why do you want to participate in the I-Corps Sites program? What do you hope to learn? What outcomes to do you want to achieve?* |  |