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| **MALAVIYA NATIONAL INSTITUTE OF TECHNOLOGY JAIPUR**  **APPLICATION FORM FOR INCUBATION AT MNIT INCUBATION CENTRE** | | | | |
| **Personal Information** | | | |
| Name of the Applicant: |  | | |
| Date of Birth: |  | | |
| Nationality: |  | | |
| Contact Address: |  | | |
| Education |  | | |
| Telephone: |  | | |
| Fax: |  | | |
| E-mail: |  | | |
| Web-Site: |  | | |
| Work Experience |  | | |
| Partners/Directors | 1.  2.  3. | | |
| **Please indicate your status:** | | | |
| You have a novel technological idea/ concept and hope to convert it in to a commercially viable product/ services through technological support/ R&D collaboration with MNIT | | Yes | No |
| You hope to become a new technology entrepreneur in 02 years | | Yes | No |
| You own/ represent a 1st Generation Start-up Company engaged in a technology business in which expertise/ research interest exists in MNIT | | Yes | No |
| **FACILITIES REQUIREMENTS:** | | | |
| 1. Why do you want to locate in the MNIT Incubation Center? | | | |
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| 2. Infrastructure requirement for space, workstations or PCs: | | | |
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| 3. List any special requirements for usage of MNIT laboratory facilities: | | | |
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| 4. Specify requirement of Mentoring and other professional services/ support: | | | |
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| 5. Indicate how your business may be benefitted by MNIT human and physical resources. | | | |
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| 6. If accepted as an incubatee, when would you want to start occupancy in the Incubator? | | | |
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| 7. How many total employees will be occupying space? (Give details)   |  |  |  | | --- | --- | --- | |  | Year 1 | Year 2 | | Full Time |  |  | | Part Time |  |  | | | | |
| 8. Are you currently occupying a facility (either in your home or at a commercial location)? If yes, what is your current occupied area in square ft.? What is your approximate monthly cost for this facility?  Rent: Rs. Utilities: Rs. | | | |
| **BUSINESS/ IDEA DETAILS: Submit a separate sheet for this if required** | | | |
| 1. Title of your Business/Technology proposal for Incubation: | | | |
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| 2. Brief Description of the Product/Services/Technology business you plan to incubate in MNIT | | | |
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| 3. Brief description of the R&D efforts and other technological inputs you hope to resource from MNIT. (Please also indicate names of faculty member(s), dept./ centers of the Institute you plan to associate and equipments facilities to be used) | | | |
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| 4. Have you interacted with the concerned faculty and has he/she/they consented to collaborate with you? | | | |
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| 5. Have you prepared a Business Plan? If yes, please submit a copy. | | | |
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| 6. Please indicate your sources of funds | | | |
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| 7. Profile of your Company, if already registered.  (Type of business, details as date of registration etc. membership of stock exchange if any, key personnel/associates, specific achievements etc.) | | | |
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| 8. Please give names and address of up to 2 referees who are acquainted with your career profession/ achievement. | | | |
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| 9. Any other detail, which would help in evaluating your proposal | | | |
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| Declaration:  I/we hereby declare that I/we have read and understood the terms & conditions of the model Incubation Agreement of Malaviya National Institute of Technology Jaipur (MNIT), provided to me by the MNIT office, and agree to sign the same once My/our Company is approved for the incubation at MNIT. | | | |

Applicant/First Promoter Applicant/Second Promoter

Signature Signature

Name: Name: