

Research experience :
Name of Institute/ University :
Employment/academic status
Status (Curriculum, Business, Certification, etc) - Detail your current situation
Professional Experience
1. Tell us your experience on Product development
2. Why do you want to take part for pre-incubation?
About Your business
Type of Business Idea
Services_____
High Technology _____
Other_____
3. Do you have already established a working group or start-up?
4. Briefly describe your business (including product/services) (Attach separate sheet, if required)
5. Be sure to describe your products and services in a way to differentiate them from the competitions' products
6. If you have website (demo / prototype associated with the company), please indicate the URL
7. Briefly describe your immediate and long-term sales goal for your start-up

8. Briefly describe your competitors

9. If you require a team for your start-up, indicate the number of partners that you need and the areas to be covered

10. While you participate in the pre-incubation program... how many hours are you going to dedicate each week? If you have other commitments, please let us know.

Your Start-up Stage?

- a. Conceptual/Idea Stage _____
- b. Design Stage _____
- c. Prototype/Solution Demo Stage _____
- d. SEED Stage _____

Legal entity (proposed)

Proprietorship _____ Partnership _____ Corporation _____

(Registration detail & Bank details / Proof)

Information about your current Start-up

11. Briefly describe what opportunity for making money does your business offer?

12. If you've already invested financially in your start-up... let us know and provide us any information about your sales and profitability projections

13. Have you had mentors?

14. Describe the current status of your start-up, including customers, users, income or any other indicator of progress.
15. What are your expected plans for your startup?
16. What's worrying you as entrepreneur?
17. What is the greatest ambition that can provide you success?
18. How do you think your past experience is going to help you in this new venture?
19. Who are your potential customers?
20. Why should we choose your project, idea or start-up business, or pre-incubation?
Service expected from MCIIE (Please give proper justifications for each head)
<ul style="list-style-type: none"> a. Shared laboratories access b. Business Consulting service c. Use of conference rooms d. Advisory services (Paid Basis) e. Legal (Paid Basis) f. Accountancy services (Paid Basis)

Details of your Team - (Please give proper justifications for applicable head)

<p>1. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>	<p>4. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>
<p>2. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>	<p>5. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>
<p>3. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>	<p>6. Name: Educational Qualification: No of years of experience: Address:</p> <p>Phone: Title:</p>

Technology Details

21. Does your business idea depend on application of certain technology, which needs to be developed? If so, please briefly describe the same?

22. Is this technology your own? Or obtained from other sources?

23. If technology for your project is provided by another lab or agency, please indicate the name of agency. (Please submit the MoA / Certificate of No Objection)

24. What is your arrangement for technology transfer and royalty payment etc with the technology providing source?

Checklist for Pre-Incubation*

A. List of Documents		
S.No.	Documents	Yes/No
1	Business Pre- Incubation Application	
2	One Pager - Business Proposal/Plan/Summary(Stating Innovation in the Business) – Soft and Hardcopy	
3	Evidence of BHU/IITBHU/ITBHU Affiliation	
4	Copy of incorporation certificate issued by ROC or registered partnership deed, if applicable	
5	Memorandum of Association, if applicable	
6	Business plan Lean Canvas	
8	Resume/CV of Innovator/Co-Promoters	
9	Ministry of Corporate Affairs’ Company Master Data, if applicable	
13	Identification card of all the Directors/Partners	
14	Identity proof documents (Driver’s License, or Voter ID Card, or Adhaar Card, or PAN Card)	
15	Address Proof of all the Directors/Partners (Electricity Bill or BSNL/MTNL Bill or Other Utility Bill)	
17	Startup India Recommendation Letter/DIPP registration certificate, if applicable	
B. Other relevant documents, if any (please mention below)		
1		
2		
3		
4		
5		
6		

***An application without above self-attested documents will be considered as incomplete and MCIIE, IIT (BHU) has right to reject your incomplete application.**

Address: Malaviya Centre for Innovation, Incubation & Entrepreneurship, Adjacent to Department of Chemical Engineering & Technology, Opposite Swatantrata Bhawan, Indian Institute of Technology (BHU) Varanasi – 221005, Uttar Pradesh (E)

Ph: 0542-2368948, 6702705, Email: tbi.mciee@iitbhu.ac.in , Website: www.mcieiitbhu.org

Declaration by Applicant	
<p><i>The information that I/we have provided is correct. I further declare that the information that I have provided here with are not proprietary in nature and that I would not make any claim on same. I have also read and understood and accepted the terms and conditions set forth in the disclaimer in the beginning of this application.</i></p>	
Applicants	Signature
Date	Place

For Office Use Only

Application Number: PREIN/MCIIE _____ 2018 A

Form Received Date:

Signature			
Name	Amit Sinha	AatanuChakrovorty	Paritosh Tripathi
Date			
Comments by Technology Expert/s with Signature			
Comments by Business Expert/s with Signature			
Approval/Comments by MCIIE Coordinator			
Duration approved for pre incubation			
Signature of Coordinator			