Technology Business Incubator @ Kongu Engineering College

**(TBI@KEC)**

Enrollment Application Form

(To be filled in by the Prospective Incubatee)

*Appropriately please tick* **( ✓ )** *or specify no’s* [ ]*in box*

1. **General**
   1. **Name of the Company / Organization :**
   2. **Name of the Incubatee :**
   3. **Designation of the Incubatee :**
   4. **Age :**
   5. **Sex** (Male/ Female) **:( )**Male **()** Female
   6. **Category** (General/SC/ST/OBC/Others) **:**
   7. **Educational Qualification**(enclose profile) **:**
   8. **If you are alumnus of KEC/KPC/KASC : ( )** Branch **( )**Year
   9. **Aadhar number** (Enclose a Copy) **:**
   10. **Permanent Address :**

* 1. **Contact Details** Off **:**

Res **:**

Fax **:**

Mobile **:**

E-Mail **:**

* 1. **Whether the Company is Registered :** Yes /  No

If yes, details of the same (Reg. No etc) **:**

(**Enclose a Copy of UdyogAadhaar| RoC**)

1. **Present Business ( If applicable)** 
   1. Present Business / Area of Activities **:**
   2. Number of years in the present business **:**
   3. Number of Employees **:[ ]**Full Time **[ ]** Part Time **[ ]**Consultants
2. **Proposed Venture** 
   1. **Nature of Venture Proposed** (Please tick in appropriate box)**:**

**()**Start-Up **()**Extension to the existing profession/company

**()**New Subsidiary **()**Others

* 1. **Legal Status** (Please tick in appropriate box / specify if in process)**:**

**( )** SoleProprietorship **( )** Company - Private Limited

**( )** Partnership **( )** Any other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. **Promoters and Core Team Members details** 
     1. **No. of Promoters:\_\_\_\_\_\_\_\_\_ No. of Core TeamMembers: \_\_\_\_\_\_\_**
     2. **Name and contact details of all promoters (if any alumni – specify):**

1. Mobile: Email:
2. Mobile: Email:
3. Mobile: Email:
4. Mobile: Email:
   1. **What is the present stage of the business?** (Please tick in appropriate box)

**( )**Idea Only

**( )**PoC Stage (say Designing the Product/Service, Working Model)

**( )**Product/Service Development Stage (say Building Prototype, testing, trial runs)

**( )**Operational Stage (say Started sales, hired employees etc)

**( )**Scaling up / Growth Stage

* 1. **Describe about Product / Service in about 4 lines**(more details may be enclosed):
  2. **Market Survey**

**(i)Size of the Market (Value in Rs.) :**

**(ii) Nature of the Market :**[ ] One Time [ ] Intermittent

(Please tick in appropriate box) [ ] Sustained

**(iii)Prospective Customers / Sectors :**

* 1. **Source of Financing the Venture :**

**()**Self (**)**Loan **()**Any assistance from Govt./Financial institutions or agency

* 1. **Have you applied for Intellectual Property Rights? :** Yes /  No

If yes, please enclose copy of the registration

1. **Incubation at TBI@KEC** 
   1. **Nature of support facility needed from TBI:**

|  |  |
| --- | --- |
| Facilities | No’s |
| Seatsin Co-working Space(not an separate cubicle) |  |
| Seats in Separate Cubicle (minimum 2 or more) |  |
| Specify special needs, if any | |

**Declare items that you may bring to TBI for your operation**

|  |  |
| --- | --- |
| Items | No's |
|  |  |
|  |  |
|  |  |
|  |  |

* 1. **Period of Incubation proposed at TBI :**
  2. **When do you propose to startat TBI :**
  3. **Number of persons to move to TBI :[ ]** Full Time**[ ]** Part Time

**[ ]** Consultants

* 1. **Is on-campus accommodation required? :** Yes /  No

If yes, for how many persons? **[ ]** Male **[ ]** Female

1. **References, if any**

Name of the Reference Person:

Organization / Designation :

Address :

Phone : Email:

**More details about the proposed product/service may be attached in the form of PPT, Project Report / Business Plan along with this application.**

**Check List – enclose:** 1. Aadharcopy 2.Breif Profile / Resume 3. Copy of UdyogAadhaar | RoC

**Date :** **………. ………………………………..**

**Place : Signature with Name**