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| Contact Information (Lead Founder) |
| Name |  |
| Street Address |  |
| City/ST/ZIP Code |  |
| Mobile Phone |  |
| Skype/Gchat/AIM |  |
| E-Mail Address |  |

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| Company and Product Information |
| Company Name |  |
| Web address |  |
| Current Location of Company (City, State) |  |
| Are you willing to relocate to the Memphis area for Phase I of the program (3 months)? |  |
| Briefly (in 50 words or less) describe your idea. |  |
| What is your company going to make? |  |
| What’s new about what you’re doing? What do people currently do because your product does not exist? |  |
| What do you understand about your business that other companies in the space don’t get? |  |
| Who do you consider your competitors? Who might become competitors? Who is the biggest threat? |  |
| How will you make money? |  |
| Would you consider being based in the Memphis area after completion of Program? |  |
| Optional: Please provide us with a short video introducing your team and your company to us (Vimeo, YouTube, or link) |  |
| Why do you think that your device is eligible for 510(k) clearance, or is 510(k) exempt? Do you know what your predicate device is? |  |
| Why do you think you can make it through the regulatory process? |  |
| Does the product need pre-clinical or clinical testing? |  |
| What stage is your device in (concept, designed)? Do you have a prototype? |  |
| Do you have a clinical advisory team? Who would be the ideal type of person you’d want to have on the team? |  |
| Why do you think the market needs your product? |  |
| Do you know what your reimbursement strategy would be? |  |
| What is the approximate size of the market that your product addresses? |  |
| Give us an estimate of your cost to product completion. |  |
| What significant milestone(s) can you achieve with a $50K investment? |  |

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| Team Information |
| For each co-founder, **including yourself**, please provide the following information: |
| Name |  |  |  |
| Age |  |  |  |
| Degree(s)/graduation yr. |  |  |  |
| E-mail |  |  |  |
| Personal website/blog |  |  |  |
| LinkedIn ID |  |  |  |
| Twitter ID |  |  |  |
| Facebook ID |  |  |  |
| Current Employer and Title |  |  |  |
| How long have the co-founders known each other? |  |
| How did the co-founders meet? |  |
| Have the co-founders worked with each other on previous projects? |  |
| What skill set(s) do you lack on the team? |  |
| How/from whom did you find out about ZeroTo510? |  |

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| Disclosures |
| Since we’ll be entrusting you with a lot of money, we need to ask you a few more things. If you’ve ever had a foreclosure or bankruptcy against you, or if you’ve been convicted of a felony, please explain and include dates. None of this automatically excludes you from the program, but we don’t want surprises.  |
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| Availability |
| The first phase of ZeroTo510 runs from May 5th 2013 for 3 months. Do any of the co-founders have other commitments in this time period that would hinder participation in the program? |
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| Agreement and Signature |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted to the program, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. |
|  |
| Name (printed) |  |
| Signature |  |
| Date |  |