

Application for Admission  
**Sid Martin Biotechnology Development Institute<sup>1</sup>**

1. Company name: \_\_\_\_\_

2. Contact information:

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Company Website Address: \_\_\_\_\_

3. Date company was established: \_\_\_\_\_

4. Chief executive officer and title: \_\_\_\_\_

5. List the names and addresses of all Officers and Board Members currently employed or serving with your firm (can provide separately or list here):

6. List the names and addresses of all members of your firm's Scientific Advisory Board (can provide separately or list here):

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<sup>1</sup> The Institute is the legal name of the Incubator. Please fill out this Word form and save under another name. Information submitted will be held in confidence and used only for evaluation for admittance to the Incubator.

7. Please provide the names, addresses and telephone numbers of five (5) professional references that we may contact regarding your company:

8. Nature of company (brief description of product or service and nature of market or market potential; attach product brochures and company literature, if available):

9. Nature of company's existing or planned research relationship with the University of Florida. Check all that apply. *(please mark appropriate box)*

- Company has (or is negotiating) a license of University technology with the University of Florida or the University of Florida Research Foundation; or
- Company has (or is negotiating) a research support agreement with the University or the University of Florida Research Foundation; or
- Company has (or is negotiating) a license of technology owned or controlled by a University faculty or employee and a royalty is being paid to the University or the University of Florida Research Foundation.

If the primary benefit is to the University of Florida, the following situations also provide a basis for a company's application to the Sid Martin Biotechnology Incubator program:

- Company has submitted or received an STTR or SBIR with the University of Florida or a University employee or faculty member integral to the work to be performed under the grant or
- A member of the University faculty or an employee has a scientific research consulting relationship with company; or
- Company has given the University of Florida a royalty-free license to its proprietary technology.
- Other (please describe; attach additional sheet if necessary)

*Please supply a copy of any executed or potential agreements (technology license, CRADA, consulting agreement, SBIR/STTR, etc.) that establishes your relationship as indicated above.*

10. Non-proprietary description of R&D program in the molecular life sciences proposed to be carried out at the BDI. Include brief description of the R&D milestones to be used to evaluate success.

11. Current status of Company ( *e.g.*, concept stage, seed stage, initial product development, working on prototype, product in advanced development, etc.):

12. Please provide information regarding the intellectual property position of your company:

13. List and describe ALL outstanding and pending legal actions against your company and/or its officers:

14. Total number of current employees (including principal officer):

Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

15. Number of employees to be housed at the Incubator and timeline for future employees:

16. Type of financing employed to date (please specify amounts)

Personal resources:

Private resources:

Venture capital firms:

Other (indicate nature):

	First Year	Second Year	Third Year
Management Staff			
Scientific Staff			
Support Staff			

17. Please attach a copy of your business plan. (Your application will not be considered until at least a preliminary draft is supplied to the Biotechnology Advisory Committee.) Include a brief description of business milestones to be used in evaluating success.

18. Approximate space requirements

- Entrepreneurial Office (Sizes range from 150 to 180 sq. ft.)
- Laboratory with Office (Sizes range from 400 to 1,000 sq. ft.)
- Laboratory without Office (Approximately 450 sq. ft.)

19. Special facilities, services, or equipment requirements (specialized fume hoods, greenhouse, fermentation, etc.)

20. Does a University employee:

- Have a direct or indirect ownership of more than 5% of your total assets or capital stock,
- Hold a position as an officer or director,
- Have or intend to have an employment relationship (as employee or consultant) with you?  
If so, please describe briefly. (This question is related to Florida's conflict of interest statutes and policies and overlaps in part with question 5, above.)

21. Approximate date you desire to locate in the Incubator:

22. Please send copies of the following corporate documents by email or mailing:

- Certificate of Articles of Incorporation and any amendments to the current By-Laws*
- If UFRF will be a shareholder or warrant holder, any relevant shareholder's agreement*
- Resumes of all corporate officers*
- Copy of Business plan or preliminary draft*
- Copies of any executed or potential agreements (technology license, CRADA, consulting agreement, SBIR/STTR, etc.) that establishes your relationship with UF*
- A copy of your most recent annual financial statement*
- A copy of your most current interim financial statement*

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Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

.....  
Please fill out this form and email or mail to:

*Please save this document under another name and email or print and mail to:*

Patti Breedlove  
Associate Director  
**Sid Martin Biotechnology Incubator**  
12085 Research Drive  
Alachua, FL 32615

pbreedlove@biotech.ufl.org

fax: 386.462.0875  
tel: 386.462.0880

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_  
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