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| C:\Users\Admin\AppData\Local\Packages\Microsoft.Windows.Photos_8wekyb3d8bbwe\TempState\ShareServiceTempFolder\NIIF-White.jpeg | NEELAM INNOVATION AND INCUBATION FOUNDATION(Registered under Section 8 of the Companies Act, 2013; CIN: U94990UP2024NPL197218) Address: Neelam College of Engineering and Technology Campus,Korai, Agra- Jaipur National Highway 11, Kiraoli, Agra 283122Email: incubation@neelamcollege.comContact: +91 97606 96802 |

**Startup Incubation Application Form**

**Welcome to Neelam Innovation and Incubation Foundation (NIIF)! We are excited about the opportunity to support your startup's growth and development. Please complete the following application form to be considered for incubation at NIIF.**

**Personal Information:**

1. **Founder/Co-Founder Names:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** | **Address** | **Email** | **Phone** |
|  |  |  |  |
|  |  |  |  |

1. **Company Information:**

 **- Company Name:**

 **- Company Registration Number (if applicable / attach certificate copy):**

 **- Company Type (if applicable):**

 **- Date of Establishment:**

1. **Address:**

 **- Registered Address:**

 **- City:**

 **- State:**

 **- PIN Code:**

1. **Industry/Vertical:**

 **- Briefly describe your startup's industry or vertical.**

**Startup Details:**

1. **Product/Service Description:**

 **- Provide a brief description of your product/service.**

1. **Unique Selling Proposition (USP):**

 **- What sets your product/service apart from others in the market?**

1. **Current Stage of Development:**

 **- Idea**

 **- Prototype**

 **- MVP (Minimum Viable Product)**

 **- Beta Testing**

 **- Launch**

 **- Other (please specify):**

1. **Target Market:**

 **- Describe your target audience and market.**

1. **Competitors:**

 **- List key competitors and briefly explain how your startup differs.**

**Team Information:**

**10. Team Members:**

 **- Provide names and roles of all team members.**

**11. Team Background:**

 **- Briefly outline the relevant background and experience of each team member.**

**Financial Information:**

**12. Funding:**

 **- Have you received any external funding or investment? If yes, please provide details.**

**13. Financial Projections:**

 **- Provide a brief overview of your financial projections for the next 12-24 months.**

**Incubation Needs:**

**14. Specific Needs:**

 **- What specific support or resources are you seeking from NIIF?**

**15. Why NIIF:**

 **- Explain why you believe NIIF is the right incubation space for your startup.**

**Declaration:**

**By submitting this application, I/we confirm that the information provided is accurate and complete to the best of my/our knowledge. I/we understand that the selection process is competitive, and the decision of NIIF is final.**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**