(*Answers are required to starred questions.

**Ted and Pat Levine Proof of Concept Entrepreneurship Initiative**

Proof of Concept helps to establish viability, isolate technical issues and suggest overall direction, as well as providing feedback for budgeting and other forms of internal decision-making processes. Source: Wikipedia (http://en.wikipedia.org/wiki/Proof_of_concept)

**Personal Information (1 of 5)**

First Name*

Last Name*

Email Address*

Telephone (format xxx-xxx-xxxx)*

Student Status*
- Current Student
- Recent Graduate

School*
- Lubin School of Business
- Seidenberg School of Computer Science & Information Systems
- Dyson College of Arts & Sciences
- School of Education
- School of Law
- College of Health Professions

Major*

Degree*

Year of graduation (expected year in case of current student)* (2014 - 2019)
Eligibility Information (2 of 5)

Completed or be enrolled in MGT 316/MGT 632 - Venture Initiation and Entrepreneurship*
- Yes
- No

Completed or be enrolled in MGT 315/MGT 635 - Small Business Management*
- Yes
- No

Completed or be enrolled in MGT 320/MGT 634 - Entrepreneurial Implementation*
- Yes
- No

Completed or be enrolled in MGT 416/MGT 678 - Business Plan Development*
- Yes
- No

Type of participation in the Pace Pitch Contest*
- Competed
- Plan to compete
- Both of the above
- None of the above

Type of participation in the Pace Business Plan Competition*
- Competed
- Plan to compete
- Both of the above
- None of the above

Type of participation in the Pace Mobile App Design Contest*
- Competed
- Plan to compete
- Both of the above
- None of the above

Business Information (3 of 5)

What type of venture do you plan to launch/expand? A commercial business (a traditional for-profit business) or a social venture (the PRIMARY mission is to provide a social benefit, may be for-profit or non-profit)*
- Commercial Business
- Social Venture

Name of your concept*
Is this an original concept, created by the applicant(s)?
- Yes
- No

Has this organization been formally established (i.e. incorporated)?
- Yes
- No

What is the legal form of incorporation? S-Corp, LLC, C-Corp, etc*

How long has this organization been in operation? (in years)*

Select sources of funding*
- Personal Savings
- Friends & Family
- Angel Investor
- Bank Loan
- Venture Capital
- Bootstrap
- Grants
- Other

What level of funding has the organization received?*
- less than $10,000
- between $10,000 and $100,000
- between $100,000 and $500,000
- between $500,000 and $1,000,000
- over $1,000,000

Aside from yourself, are there any others that have an ownership stake*
- Yes
- No

If you answered 'Yes' to the previous question, please list names and equity percentages

If any of the founding team members have built anything before this business (website, product, business), please list and include URLs if possible.*
Please share some background information on your team members and tell us what makes your team special.*

Business Concept (4 of 5)

Describe your concept*

What problem are you solving?*
What is your solution?*

What makes your solution special?*

Who is your target customer - the person/entity that would actually purchase your product/service?*

What is your basic business model - how will you make money?*
How large is your market - your specific addressable market, not the market in general or the entire industry?

Who is your primary competition?

What about potential competitors and competitive response?

What are they key challenges you face in implementing your concept/expanding your venture?
Is there anything else exceptional about your business you would like to tell us?

Business Implementation (5 of 5)

Have you validated the market for your product or service (e.g. Paying customers, subscribers, lab/trial data, etc.)?

Do you have an online demonstration of your product or service?*

- Yes
- No

If you answered 'Yes' to the previous question, please list the links with titles.