

APPLICATION FORM FOR RECOMMENDATION TO STARTUP APPLICANTS

(Individuals/ Teams/ Registered Firms and Subsidiaries/ Ancillaries of Established Firms)

UNDER MANIT-ROLTA INCUBATION CENTRE ROLTA INCUBATION CENTRE

MAULANA AZAD NATIONAL INSTITUTE OF TECHNOLOGY
BHOPAL

Benefits prescribed under Start-up India Action Plan are available only to start ups working towards:

1. Innovation,
2. Development
3. Deployment or commercialization of new products
4. Processes or services driven by technology if

it aims to develop and commercialize.

| | | |
|----|---|------------------------------|
| 1. | Name/ Title/ Theme of the Startup | |
| 2. | Contact details Primary Contact Person Present Designation/Occupation: Work Experience (if any): Mobile No.: Email: Qualification: Date of Birth: Sex: Registered Address: Office Address: Phone No.: Official Website: | |
| 3. | Student Applicant Name of the Institute: Branch: Semester: Date of Birth: Sex: | Yes / No |
| 4. | Are you a registered company If yes Registration number and date: Has the Company filed all IT returns till date: | YES / NO YES / NO |

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| | | PAN: TAN: Service Tax: Does the company have an SSI registration: |
| 5. | Legal Status of firm | PVT. LTD / LLP / RP / OPC |
| 6. | Core Offering of the Start Up <i>(not more than 50 words)</i> <i>(Attach a separate sheet if needed)</i> | Products, Processes or Services driven by technology: |
| 7. | Capital structure with name of shareholders for Pvt. LTD company | <ul style="list-style-type: none"> • Authorized Capital: • Paid up Capital: • Share Holding Structure: |

| Name of Shareholder and DIN numbers | No. of shares | Percentage Holding | Founder (YES / NO) | Designation / Role in Company | Full Time (FT) or Part time (PT) |
|-------------------------------------|---------------|--------------------|--------------------|-------------------------------|----------------------------------|
| | | | | | |
| | | | | | |

Note: In case Shareholders / Founders are also share holders in other companies (Pvt. Ltd. / Partnerships), the same MUST be declared separately.

| | | |
|----|---|---|
| | 8. Partnership/LLP details | Name of each partner: <ul style="list-style-type: none"> • Contact Name & Details: ○ Designation: ○ Address: ○ Email: ○ Mobile No.: |
| 9. | What is the annual turnover of the company since Incorporation (as per IT Returns filed)? <i>(Turnover in INR crores)</i> | Year 1 (2011-12) : Year 2 (2012-13) : Year 3 (2013-14) : Year 4 (2014-15) : Year 5 (2015-16) : |

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| 10. | <p>Please explain your revenue model?</p> <p><i>(not more than 100 words)</i> <i>(Attach a separate sheet if needed)</i></p> | <ul style="list-style-type: none">• How do you currently generate revenue for the company? • If you are still in idea/prototype development stage, please explain how you anticipate generating revenues? |
| 11. | <p>Details of all Founders: <i>(Attach a separate sheet if needed)</i></p> <p>Name: Educational Qualifications (Std. passed / Degree, Year, University)</p> <p>Work Experience (Company, No. of Years, Functional Area)</p> <p>Permanent Address</p> <p>Name: Phone No.: Mobile No.: Email: PAN Card No.: AADHAR Card No.:</p> | |
| 12. | <p>Have any of the Founders of the company left the Company?</p> | <p>YES / NO</p> <p>If Yes, please furnish the details such as tenure in the company, designation and reason for leaving.</p> |
| 13. | <p>Novelty in your Idea for the Startup</p> <p><i>(Explain in detail the innovative/ novelty features)</i></p> | <p>ATTACH SUPPORTING DOCUMENT AS A PROOF TO JUSTIFY THE NOVELTY</p> |

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| 14. | Do you represent a 1 st generation Startup? | |
| 15. | Do you or team members have any previous business experience? | YES / NO |
| | If yes, briefly mention how the past experience is going to help you in this new venture. | |
| 16. | What are the financial strengths of your team members? | |
| 17. | Is this Idea/Startup related to your or any team member's family business? | YES / NO |
| 18. | How many employees will be working in the startup? | a. Full Time : b. Part Time : |
| 19. | What is the expected time to develop a working prototype or concept? | |
| 20. | Have you interacted with any faculty of MANIT, Bhopal for mentoring/ collaboration? | |
| 21. | Specify requirements from MANIT- Bhopal (Mentoring/Equipment/Workshop facility, if any) | |
| 22. | If you are selected as a Startup in MANIT Bhopal, time required to initiate the activity | |
| | | |

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| 23. | <p>Give a summary of the Business Plan for the Startup under the following heads:</p> <p>a) Product Description, Design, IPR issues, and Stage of development</p> <p>b) Machinery and capital needs (if any)</p> <p>c) Equipment, Accessories, and Software Required</p> <p>d) Break-up of the estimated project cost :</p> <p style="padding-left: 20px;">i. Prototype Development and Testing: Rs.</p> <p style="padding-left: 40px;">ii. Working Capital: Rs.</p> <p style="padding-left: 40px;">iii. Test Marketing: Rs.</p> <p style="padding-left: 40px;">iv. Legal Expenses: Rs.</p> <p style="padding-left: 40px;">v. Contingency: Rs.</p> <p style="padding-left: 20px;">vi. MANIT Consultancy Charges: Rs.</p> <p style="padding-left: 20px;">vii. Any other expenses: (Pl. specify) : Rs. _____</p> <p style="padding-left: 40px;">Total Project Cost: Rs _____</p> <p>e) Expected revenue during the first three years of commercialization: Rs.</p> | |
| 24. | <p>Have you received any financial support for your proposed/present work?</p> <p>If yes, give details</p> | |
| 25. | <p>Other expected sources of fund</p> | |
| 26. | <p>Potential users of the end product</p> | |
| 27. | <p>What “problems” of Society / End Customers are solved through the core offering by the startup (provide a list)</p> | |

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| 28. | <p>Technology behind the core offering by the Startup (tick applicable):</p> <p>NOTE:</p> <ul style="list-style-type: none"> • IF SELF DEVELOPED:Technology development time & linkages used / is the technology Patentable / status of patent and-or application / countries where applicable / if not yet patented what are the strategies for protection • IF ACQUIRED / LICENSED: From whom & terms – conditions • IF OFF THE SHELF: Comments on the ‘innovation’ from the startup <p><i>(Attach a separate sheet if needed)</i></p> | <ul style="list-style-type: none"> • TO BE DEVELOPED • SELF DEVELOPED • ACQUIRED • LICENSED • OFF THE SHELF | | | | |
| 29. | <p>Who are your competitors and what is your competitive advantage?</p> <p><i>(Comparison with Existing Products / Companies)</i></p> <p>Note: In case of claims that there are “NO COMPETITORS” – should be adequately justified (in not more than 100 words).</p> | Features of Product | YOUR STARTUP | Existing prod. / company 1 | Existing prod. / company 2 | Existing prod. / company 3 |
| | | 1. | | | | |
| | | 2. | | | | |
| | | | | | | |
| 30. | <p>Value proposition(s) to the customer segment</p> <p>a) Indicate measurable outcomes – comparisons with existing scenario</p> <p>b) Comments on intangible benefits (not more than 50 words)</p> | | | | | |
| 31. | <p>Market linked information</p> | <p>Which markets are you addressing (tick appropriate):</p> <ul style="list-style-type: none"> • DOMESTIC • GLOBAL • BOTH | | | | |
| 32. | <p>What is the estimate of the addressable market size?</p> <p>Describe how you arrived at this and indicate assumptions used.</p> | | | | | |
| 33. | <p>List your “Go To Market Strategies”</p> | | | | | |

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| 34. | Do you have paying Customers? If yes then how many are repeat customers (indicate percentage) and what is the current Order Book Size | |
| 35. | List your major customers / first adopters (if any) | |
| 36. | Who is/are the End Customers ? | |
| 37. | Time schedule/progress plan (preferably in a chart/diagram) | |
| 38. | Any other information which would help in evaluating your proposal | |
| 39. | Give names, designations, affiliations, and addresses of two references: (contact details & email) | 1. Reference 1 2. Reference 2 |
| 40. | Application Processing Fee | An amount of Rs.10000/- (Rupees Ten Thousand only) to be paid towards processing charges in the form of DEMAND DRAFT in favour of The DIRECTOR, MANIT, Bhopal at MANIT- SBI Branch, Bhopal (SBIN0001608) |

- I certify that the information set provided above is correct. Further, our entity
 - has not exceeded turnover of INR 25 crore for any of the financial years; and
 - is working towards innovation, development, deployment or commercialization of new products, processes or services driven by technology or intellectual property; and
 - is not formed by splitting up or reconstruction of a business already in existence.

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UNDERTAKING

(On a Rs.100/- Stamp Paper)

I/WE have read the above guidelines as well as the appended Gazette 180(E) and Startup India FAQ's.

I/WE hereby declare that all the information provided by me / us is true and correct. I / WE have not hidden any information that could impact the decision of _____(name of Incubator) to give this recommendation letter.

I/We hereby declare that our startup has not been blacklisted/debarred by any agency/state government/central government authority for any issues related with the directors/company.

I / WE understand that in case our Startup is not recommended by the Technical Recommendation Committee, it would be fully acceptable to us without any legal action/reaction to the recommendation.

I / WE understand that in case our Startup is recommended, it is based on the information furnished by me / us and in case there is any significant deviation in core offering and other changes in the venture, I / WE would keep the Incubator / DIPP informed.

I/WE recognize that the Recommendation given by the Incubator will be used solely for the purpose of uploading on the Startup India portal and not used for any other purpose.

Signature

Name of Applicant:

Company Seal:

NOTE FOR STARTUPS

Start ups are free to approach reapply again to the incubator after incorporating the changes that might help it to get the recommendation or they are free to approach another incubator for obtaining recommendation.

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