# **APPLICATION FOR TECHNOLOGY BASED BUSINESS CREATION (EBT) PROJECT BASED ON RESEARCH RESULTS**

The purpose of this form is to gather the basic information to evaluate the project of creating an EBT of the results generated in the environment of the IISPV and to determine, where appropriate, the most appropriate way to proceed in the management of the transfer of results.

Please complete the entire form and once signed by the entrepreneurial team, send the original to:

IISPV Innovation and Transfer Unit: valoritzacio@iispv.cat

|  |  |
| --- | --- |
| Hospital Universitari Sant Joan de ReusAvda. Josep Laporte, 2Planta 0 - E2 color taronja43204 Reus (Tarragona) | Parc Sanitari Joan XXIIIc/ Doctor Mallafrè, 4 43005 Tarragona |

The creation of a spin-off in the IISPV is subject to the regulations for the creation of companies approved by the Board of Trustees on July 20,2020

(<https://www.iispv.cat/innovacio>).

|  |
| --- |
| **Contact person during the process of the application**: First and last name: Department and Center: Haga clic aquí para escribir texto.Phone:  A/e:  |

Communicates and expresses interest in promoting a Technology-based company.

1. **DESCRIPTION OF THE RESULTS OF THE RESEARCH TO BE EXPLOITED**
2. Briefly explain the result of the research you want to exploit (patent, *software*, *know how*)

Haga clic aquí para escribir texto.

1. Origin, or result derived from projects or contracts, with other inventors or institutions (identify them)

Haga clic aquí para escribir texto.

Is the ownership of the knowledge or Technology to be exploited Shared with another entity?

[ ]  No

[ ]  Yes Witch which entity?

 With what %?

 Is there a contract that proves this? [ ]  Yes [ ]  No

Is the knowledge or technology to be exploited protected?

[ ]  No

[ ]  Yes Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **DESCRIPTION OF THE ENTREPRENEUR TEAM:**

Inventors attached to the IISPV:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and last name** | **DNI** | **Relationship with the IISPV** | **Professional****Category** | **% participation** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal (A) |  |

Inventors belonging to other entities:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and last name** | **DNI** | **Institution**  | **Category Professional** | **% Participation** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal (B) |  |

|  |  |
| --- | --- |
| **Total (A+B)** |  |

**Signature of the entrepreneurial team: Date:**

|  |  |  |
| --- | --- | --- |
| 1. | 2. | 3. |
| 4. | 5. | 6. |
|  |  |  |

1. **DESCRIPTION OF BUSINESS ACTIVITY:**

The data requested below are merely indicative for the IISPV on the EBT business creation project, data that allow the streamlining of procedures.

1. PRODUCT

Briefly describe the type of product and/or service being offered, as well as the competitive advantages over potential existing products.

1. MARKET

Briefly describe the market to which the product and/or service offered is aimed, the current situation and the segment of the population to which it is addressed.

1. BUSINESS PLAN

[ ]  It has a business plan (Attach) [ ]  He doesn’t have it, because: .........................................

Technical and financial feasibility reports: [ ]  YES [ ]  NO

1. NON-CONFIDENTIAL SUMMARY

Brief description to use for promotional purposes, explaining the benefits and applications, without detailing any inventive aspects or confidential technical details.