

# **Company Information**

# **Applicant Company Legal Name**

Your Company

# **Year Incorporated**

Please indicate the year that you were incorporated to do business.

# Underrepresented Leader Information

First Name of Underrepresented Leader:

Last Name of Underrepresented Leader:

Title of Underrepresented Leader:

> E-mail Address of Underrepresented Leader:

**Applicant Company Web** Address:

# **Business Address**

**Business Address:** 

Business City/Town:

**Business State:** 

Business Zip Code:

**Business Telephone:** 

# **Press Contact**

Is the Press Contact the same as the Underrepresented Leader?

Name of press contact:

Press contact e-mail address:

Press contact telephone:

Additional Company Information					
Life Sciences Category					
Please check no more than TWO categories.					
Agricultural biotechnology	Digital Health	Regenerative Medicine			
☐ Bioinformatics	Drug Discovery/Development	Professional Services			
CRO/CMO	Health Information Technology	Technology/Tools for Life Sciences			
<b>Diagnostics</b>	Medical Device	Other			
If other, please specify: Stage of Development					
Please check one that best describ	pes your stage of product development.				
Select One					
Number of Employees (company	r-wide)				
What is the current total number of W-2 FTE (full-time equivalent) employees (company-wide)? Consultants, 1099 employees, or interns do not count as part of this number. For purposes of this program, employees are considered to be full-time equivalent if they work 35 hours or more per week for this company.					
Number of Employees in Massachusetts					
What is the current total number of W-2 FTE (full-time equivalent) employees in Massachusetts? Consultants, 1099 employees, or interns do not count as part of this number. For purposes of this program, employees are considered to be full-time equivalent if they work 35 hours or more per week for this company.					
Is the company pre-revenue?					
If no, please provide the revenue f	or the last year.				
Describe the source AND magnitude of dilutive capital (from angel investors, venture capitalists, institutional investors, etc.) raised to date.					
Please note total <b>DILUTIVE</b> capital raised by the company <b>can't exceed \$5M (excluding non-dilutive grants)</b> to be eligible to apply. The recommended number of words for this answer is: 75 words.					
Describe the source AND magnitude of non-dilutive funds (e.g., SBIR/STTR, other grants, loans, or other types of non-equity financing) received to date.					
The recommended number of words for this answer is: 75 words.					

Overview of the Management Team

Underrepresented Leader's Role				
Please describe your <b>role</b> in the company, including any <b>responsibilities</b> .				
Education and Relevant Experience				
The recommended number of words for this ar	nswer is: 150 words.			
How do you identify yourself?				
Please check all that apply				
Arab American, Middle Eastern and North African American	Asian American, Pacific Islander, or Native Hawaiian	Black, African American, or Afro Caribbean		
Female	Hispanic, Hispanic American, or Latinx/Latin	Indigenous, Native American, or First Nation		
LGBTQIA+	Living with apparent or non-apparent disability	Neurodiverse		
Refugee, Immigrant, or Migrant	Socially disadvantaged	<b>□</b> Veteran		
Other				
If other, please specify:				
Other Management Team Member(s)				
Please list the names of other team members	and denote female and diverse member(s).			
Please provide relevant experience for all ar The recommended number of words for this ar				
Members of the Board of Directors				
Please list the names of Board of Director mer	mbers.			
Please provide relevant experience for all ar	nd denote female and diverse member(s).			
The recommended number of words for this ar	nswer is: 150 words.			
Members of the Scientific Advisory Board				
Please list the names of Scientific Advisory Bo	ard members.			
Please provide relevant experience for all ar	nd denote female and diverse member(s).			
The recommended number of words for this ar	nswer is: 150 words.			
Has the team or company been recognized	for any awards in the last three years?			

The recommended number of words for this answer is: 100 words.

Has the team or company worked with a mentor or mentoring organization in the last three years? If so, elaborate.

The recommended number of words for this answer is: 100 words.

# **Technology and Company Overview**

#### **Company Summary (abstract)**

The recommended number of words for this answer is: 500 words.

Describe the clinical unmet need or problem the technology seeks to address.

The recommended number of words for this answer is: 100 words.

What is the current state of the art or standard of care for the above market/patient population?

The recommended number of words for this answer is: 150 words.

### What is your competitive advantage?

The recommended number of words for this answer is: 100 words.

### Who is the typical buyer?

The recommended number of words for this answer is: 75 words.

#### What are your pricing and reimbursement strategies?

The recommended number of words for this answer is: 75 words.

### What is the regulatory pathway for your product?

The recommended number of words for this answer is: 75 words.

### What is the IP strategy and what is the current IP status?

The recommended number of words for this answer is: 75 words.

Where did the technology originate? If a license to practice and/or develop is required, has it been in-licensed and from whom?

The recommended number of words for this answer is: 75 words.

# Proposal to MLSC

What are the key challenges to successful commercialization and what is your strategy for mitigating the risk they introduce?

The recommended number of words for this answer is: 150 words.

#### What is your fundraising plan for the next 3 years?

The recommended number of words for this answer is: 75 words.

Do you plan to stay and grow in Massachusetts? Please explain.

The recommended number of words for this answer is: 75 words.	
Why do you want to participate in the MassNextGen Initiative?	
The recommended number of words for this answer is: 300 words.	
What will your company accomplish with approximately \$100,000 in grant money? Please include proposed use of funds. <i>Please Note: The MLSC has sole discretion to decide the number and sithe quality of applicants.</i>	
The recommended number of words for this answer is: 150 words.	
If you were selected for an award, would you be interested in a lab bench at	
Please check all that apply	
Berkshire Innovation Center (BIC) InnoVenture Labs	Mansfield Bio- Incubator
Massachusetts Biomedical Initiatives (MBI)  Massachusetts Medical Device Development Center (M2D2)	□ No
What do you hope to get from the Executive Coaching? How will that benefit you and your complong-term?	pany in the near-term and
The recommended number of words for this answer is: 150 words.	
What is the expected outcome for you and your company at the conclusion of the one year prog	yram?
The recommended number of words for this answer is: 150 words.	
What is the vision for the company in three years?	
The recommended number of words for this answer is: 75 words.	
What is your long-term strategy for maintaining diverse leadership in the company?  The recommended number of words for this answer is: 75 words.	

# Signature

# How did you hear about the program?

--- Select One ---

### Other:

### **Authorized Representative Signature and Acceptance**

I verify that I am authorized to commit my organization and to make this application on behalf of the organization. I certify that the above information is correct and that the statements made herein, including all attachments and exhibits, are true and correct to the best of my knowledge. The submission of false information to the Massachusetts Life Sciences Center (MLSC) is subject to prosecution under the False Claims Law at M.G.L. c. 12, sections 5A – 5O.

I understand that this MassNextGen Program Application may be disqualified if it does not contain all required information or if the Applicant does not meet the eligibility criteria required under the Program. I specifically acknowledge that all of the terms and conditions of the Solicitation are mandatory.

On behalf of the applicant, I understand and acknowledge that all materials submitted as part of this application are subject to disclosure under the Massachusetts Public Records Law. Furthermore, I understand and acknowledge that I have followed the procedures set forth in the <a href="Confidentiality Section">Confidentiality Section</a> of the MassNextGen Program Solicitation for any documents that I believe may be proprietary in nature and that may fall within the parameters of the MLSC's Trade Secrets Exemption; and that the MLSC's receipt of such documents does not represent a finding by the MLSC of the Supervisor of Public Records that such documents fall within the Trade Secrets Exemption.

I acknowledge and agree that the MLSC has sole discretion to determine which applicants receive benefits under the Program.

Select to receive email notices and updates from MLSC	
You may unsubscribe at any time.	
Select to receive email notices and updates from MLSC	