



Maryland Tech Council Venture Mentoring Services (MTC VMS) Mentee Company Application

This completed form should be submitted to the MTC VMS Operations Division mentor@mdtechcouncil.com

Please confirm you meet the following criteria by checking each requirement below:

- Technical or life sciences company led by an individual or individuals working full time on the business
- Technical or life sciences company, with a nexus to Maryland
- Technical or life sciences company with a demonstrated proof of concept
- Technical or life sciences company preparing for their first venture or institutional round of financing

Date: _____ Company Name: _____

Mailing Address Street: _____

City: _____ State: _____ Zip: _____

Industry/Technology: _____

Mentee Company Principals (list primary contact first):

Name and Role in the Mentee Company

E-mail address Telephone Cellular

MTC affiliation (if applicable) Staff Other: _____

Name and Role in the Mentee Company

E-mail address Telephone Cellular

Name and Role in the Mentee Company

E-mail address Telephone Cellular

Referred to MTC VMS by: _____

Other Mentee Company Venture Activity (please list all that apply, past & present):

Other Venture: _____

Name: _____

Company Name: _____

Attach Bio and Business Description or Business Plan

Please provide a brief (less than two pages) description of your business, summarize its current status and describe any other mentoring services you have received.

With which technology/market areas are you most comfortable?

Please check the appropriate box

Least comfortable-----Most comfortable

Founders/employee ownership issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Licensing and patents evaluation/strategy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic review of technology (as it applies to market and business models)/alternatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vision/marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business plan outline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business plan review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Review of financials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funding strategy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presentation review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
“Fund raising pitch”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
“Product pitch”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investment Financing Sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investment/financing sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
“VCs”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

“Other” – Briefly Describe

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In order to participate in MTC VMS, you must sign the acknowledgments and release from liability provided on this form. If you have questions or concerns about this form, you may wish to consult legal counsel.

Applicant Information

Name: _____

Company Name: _____

Acknowledgments and Release from Liability

I acknowledge that I have read, understand and will abide by the MTC Venture Mentoring Service *Statement of Principles*, a copy of which has been given to me.

I also acknowledge that MTC VMS mentors are uncompensated and can provide only educational support and that they cannot make business decisions for VMS mentees, and I hereby release from liability, and waive all claims that I, [Name of mentee company], my heirs, successors and assigns and the company heirs, successors and assigns may have against any MTC VMS mentor for any actual or claimed errors or other acts or omissions.

I further acknowledge that MTC VMS does not control or direct its mentors in connection with services provided to mentees, and I hereby release from liability, and waive all claims that I, [mentee company], my heirs, successors and assigns and the company's heirs, successors and assigns may have against MTC VMS and its directors and officers for any actual or claimed errors or other acts or omissions of MTC VMS mentors.

Finally, I acknowledge that the activities of MTC VMS are conducted largely by volunteers on a best-efforts basis who are fully independent of and are not directed by Maryland Tech Council, its employees, or its officers. I hereby release from liability and waive all claims against Maryland Tech Council that I, my heirs, successors and assigns and [mentee company], its heirs' successors and assigns may have for any actual or claimed errors or other acts, or omissions, including, but not limited to negligent acts of Maryland Tech Council, its directors, employees and members and MTC VMS or its committee members, employees, mentors or anyone else connected with MTC VMS.

Company Name: _____

Signature: _____

Print Name: _____ Title: _____

Date: _____

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Company Name: _____

Name of FTE: _____

1. Who we are and what we do:

2. Briefly describe the status of the current marketing, funding and staffing:

3. What is the problem, who has it and how do we solve it:

4. The Business Model (attach separate document if necessary)

5. Assistance Sought?

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