

## Project Setup Form for SBIR Awardees



For assistance or further information regarding Foresight's TNA™ please contact Norton Kaplan at 401-273-4844 ext. 19. Email setup form to: [norton.kaplan@foresightst.com](mailto:norton.kaplan@foresightst.com) or fax to 401-273-4744.

**Foresight ID Number:**

<b>Company Information: Name, Address, Website</b>	
<b>Contact Person for Guidance, Receipt of Report, and Approval of our Work:</b> <i>Name, Title, Email and Phone</i>	
<b>Primary Technical Contact Person if Different:</b> <i>Name, Title, Email and Phone</i>	
<b>Name of Technology or Project:</b>	
<b>Your SBIR Award Grant/Contract Number:</b>	
<p><b><u>Non-Proprietary Description of technology:</u></b></p> <p><i>This is the only information that we disclose to experts, end-users and potential commercialization partners. In order to get the most informative feedback from these individuals, the more information that is included in this description the better.</i></p> <p>Typically, the non-proprietary description is one to two paragraphs in length. In addition to the technology description, the following information, if available in a non-proprietary format, may be considered for inclusion in this section:</p> <ul style="list-style-type: none"> <li>• Brief overview of technology and the problem it aims to solve.</li> <li>• Relative size of technology (i.e. is it bigger than a breadbox? Can it fit on a crowded lab bench?)</li> <li>• Stage of technology's maturity (<i>i.e. conceptual stages? In vitro, pre-clinical or clinical validation studies performed? Do you have a prototype?</i>)</li> </ul>	
<b>Comparison with Substitutes:</b> <i>What are the major substitutes for your technology and why is your technology better than these alternatives? Please be as specific as possible.</i>	

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<p><b>Do you have a primary application of interest?</b>  <i>Your best guess as to where you want your technology commercialized</i></p>	
<p><b>What other applications have you considered?</b></p>	
<p><b>Do you have a patent or have you published anything on this technology:</b> <i>If yes, please list patent number(s) and/or most relevant publications.</i></p>	
<p><b>Geographic Region of Interest</b> <i>(if a focus is desired):</i></p>	
<p><b>Are there any companies or people we SHOULD NOT contact?</b></p>	
<p><b>We normally identify your company or organization when speaking to people. Do you wish to remain anonymous?</b></p>	
<p><b>Please provide key words describing this project.</b></p>	

‘X’ SELECTED GROUP	TNA GROUP	EARLIEST POSSIBLE START DATE	ESTIMATED GROUP COMPLETION DATE
	A	July 27, 2009	Early November 2009
	B	November 2, 2009	Early February 2010