

<b>INFORMATION FORM</b>  PUSAT INOVASI MAHASISWA & KEUSAHAWANAN TEKNOLOGI (UTMXCITE) UNIVERSITI TEKNOLOGI MALAYSIA (UTM)	<b>Reference Number</b>  
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**Notes:** The original document of this form must be sent to the secretariat together with a copy of application form

**DETAILS OF INNOVATION PROJECT / STARTUP COMPANY:**

TITLE OF PROPOSED INNOVATION PROJECT / STARTUP COMPANY:

DURATION OF THIS PROJECT / BUSINESS (MAXIMUM 18 MONTH)

DURATION:                                      FROM:                                      TO:

**PROPOSED OF INNOVATION PROJECT / STARTUP COMPANY**

EXECUTIVE SUMMARY (MAXIMUM 100 WORDS)

PROJECT DETAILS:

**1) Project Objectives**

**2) Project Methodology**

**3) Customer & Need Identification**  
*Who Is Or Are The Potential Customer (s)*  
*What Is The Important Customer Need*

**4) Product/Service Description**  
*Key Features & Capabilities*  
*How Does This Address The Customer's Need*

**5) Market Analysis**  
*How Big Is The Market (Units, Sales, Revenue)*  
*Market Trends*

**6) Market Competition**  
*Market Approach*  
*Competitive Comparison*

**7) Technology Plan**

*Sustainable Technology Road Map Being Proposed for The Product*

**8) Management Plan**

*Team's Activities & Motivation to Commercialize the Invention*

**9) Project Activity Flow Chart**

*Project Activity Gantt Chart (Milestones & Dates)*

*Project Expected Outcomes*

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PRESENTATION SLIDE ATTACHED	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>
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**BUDGET**

No.	BUDGET DETAILS:	NUMBER OF FUNDS / LOANS APPLIED (DETAILED BREAKDOWN)
1.	Supplies and Project Materials <i>Bekalan dan bahan projek</i>	
2.	Accessories, Equipment and Software <i>Aksesori, peralatan dan perisian</i>	
3.	Professional Services <i>Perkhidmatan ikhtisas</i>	
4.	Wages and Allowances <i>Upah dan elaun</i>	
5.	Travels and Transports <i>Perjalanan dan pengangkutan</i>	
6.	Communications and Utilities <i>Perhubungan dan utiliti</i>	
7.	Rentals <i>Sewaan</i>	
<b>TOTAL:</b>		

INDUSTRIAL CONTRIBUTION – IF ANY (IN THE FORM OF FINANCIAL FUNDS, EXPERTISE, EQUIPMENT, OR SERVICES THAT NEED TO BE TRANSLATED IN THE FORM OF MONETARY VALUE.

YES (STATE THE AMOUNT): <input type="checkbox"/>	NO: <input type="checkbox"/>
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DECLARATION BY APPLICANT

All information stated here are accurate, UTMXCITE has the right to reject or to cancel the offer without prior notice if there is any inaccurate information given.

Date :

Applicant's Signature :

**Notes: \*ALL INFORMATION WILL BE TREATED IN FULL CONFIDENTIAL**