



2021 Application

This document is for reference only.
All applications must be submitted through our website at
www.pharmstars.com/apply.

Thank you for your interest in joining the first PharmStars startup cohort. When completing the application below please do not include any confidential information, personal information about others, patient data or links to patient data in your responses.

It is not possible to save this application as a draft. Please download a copy of the application [here](#) if you wish to work on your application offline. Once submitted, the application cannot be edited.

The application cannot be submitted until all mandatory fields are filled. All fields indicated with an asterisk are mandatory.

Applications must be submitted by 11:59 p.m. ET on July 21, 2021 to be considered.

Demographics

Company Name *

Company Description *

Company Website *

Company Location *

City

State / Province

Please Select

Country

Your Name *

First Name

Last Name

Your Role *

Email *

Email address is required to save application in draft form

Phone Number *

Your Location *

City

State / Province

Please Select

Country

You must be 18 years or older to participate in PharmStars. Please confirm that you are eligible to participate in the program:

☐ I attest that I am 18 years or older. *

Solution

Does your solution enhance clinical trials? *

☐ Yes

☐ No

If so, what clinical trial problem are you trying to solve? *

Maximum 1000 characters

If not, what problem are you trying to solve? *

Maximum 1000 characters

What is your solution and who is the primary user? *

Maximum 1000 characters

What is the status of your solution? *

☐

Concept

☐

Prototype

☐

Pre-market
product

☐

Marketed product

What is your business model? To whom and how do you sell your solution? *

Maximum 1000 characters

Is your solution regulated? *

☐

Yes

☐

No

☐

I don't know

If so, What is your regulatory strategy? *

Maximum 1000 characters

Company Details

Have you raised funding? *

☐

Yes

☐

No

If so, what stage was your last round of funding?

How many FTE's do you have? *

How old is your company? *

If applicable, what therapeutic area(s) do you focus in?

What type of digital health solution is your product? (check all that apply) *

☐

Algorithm/AI/ML

☐

App

☐

Biomarker

☐

Device or tool

☐

Game

☐

Robots

☐

Sensors

☐

Video

☐

Other

What category of digital health application does your solution fall into? (check all that apply) *

☐

Behavior modification

☐

Diagnostic

☐

Digital therapeutic

☐

Education

☐

Health/Wellness

☐

Medication adherence

☐

Monitoring tool

☐

Patient recruitment/retention

☐

Physician communication

☐

Preventative

☐

Virtual care

☐

Other

Accelerator Participation

Are you currently working or negotiating with any pharma firms? *

☐

Yes

☐

No

If so, which firms are you working with and on what? *

Maximum 1000 characters

What has been your experience working with pharma thus far? *

Maximum 1000 characters

What are your goals from participation in the PharmStars accelerator? *

Maximum 1000 characters

Have you participated in any other accelerators? *

☐

Yes

☐

No

Which accelerator(s)? *

Who will represent your company in PharmaU?

Representative 1: First Name * Last Name * Title *

Representative 2: First Name * Last Name * Title *

How did you hear about PharmStars? (check all that apply) *

☐ Friend ☐ News Article ☐ Social Media ☐ Search Engine ☐ Other

In addition to being considered for this cohort, would you like us to keep your application on file to be considered for future cohorts? *

☐ Yes ☐ No

Additional Information (optional) - *fields below are optional and can be left blank*

Upload your executive summary or pitch deck below:

Browse Files

Drag and drop files here

We would appreciate seeing your elevator pitch. Please record a 1-minute pitch, upload to YouTube or Vimeo and share the link here:

Anything else you would like to share?

Maximum 1000 characters

The Submission Process

Please confirm that you have read and will comply with the [Program Terms](#) if selected to participate in PharmStars.

☐ I agree to PharmStars [Program Terms](#). *

Your application must be submitted by 11:59 p.m. ET on July 21, 2021 to be considered.

Once you have submitted your application, you will receive an email confirmation within 24 hours of application submission. If you do not receive this confirmation, please contact us at support@PharmStars.com. Applications will not be returned.

Invitations to join PharmStars will be sent by email on or around August 23, 2021. Invited applicants will have up to three (3) days to respond. All other applicants will be notified of their status on or around August 30, 2021.

PharmStars first cohort will commence on September 1, 2021. Please ensure that you are available to attend our twice-weekly classes starting Thursday, September 2. Classes will meet every Monday and Thursday from 1-3 p.m. ET September 2 through November 4, 2021.

Please confirm you are not a robot by answering the question below: *



x + x =

Thank you for applying to join PharmStars!

Please contact support@PharmStars.com with any technical questions.

For general questions, please contact info@PharmStars.com.