



Spring 2022 Application

Digital Innovations in Neurological Disease

FOR OFFLINE REFERENCE ONLY
All applications must be submitted online at
www.pharmstars.com/apply

Thank you for your interest in participating in PharmStars' upcoming 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.

This PDF version of the application is for your use offline only. In order to be considered, you must submit your application online at www.pharmstars.com. It is not possible to save an application online in draft form. Once submitted online, the application cannot be edited.

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

Applications must be submitted by **11:59 p.m. ET on February 4, 2022** to be considered.

Demographics

Company Name *

Company Description *

Please provide one sentence describing your company (max 200 characters).

Product Description *

Please provide one sentence describing your product (max 200 characters).

Company Website ***Company Location ***

City State / Province

Country

Your Name *

First Name Last Name

Your Role ***Email *****Phone Number ***

Please provide your cell phone, not the company phone number.

Your Location *

City State / Province

Country

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

Solution

1. Can your innovation be applied to neurological disease? *

☐
Yes

☐
No

1a. If you are focusing on a particular neurological condition, what is it? *

2. What is the problem are you trying to solve? *

3. What is your solution? Who is the primary user? *

4. What type of digital health solution do you have? (check all that apply) *

Algorithm/AI/ML

Game

App

Robot

Biomarker

Sensor

Device or tool

Video

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

Behavior modification

Monitoring tool

Diagnostic

Patient recruitment/retention

Digital therapeutic

Physician communication

Education

Preventative

Health/Wellness

Virtual care

Medication adherence

6. Who are your three closest competitors? *

7. What is the status of your solution? *

☐
concept

☐
prototype (pre-market)

☐
on the market

8. What is your business model? How and to whom do you sell your solution? *

9. Is your solution regulated? *

☐
Yes

☐
No

☐
I don't know

9a. What is your regulatory status? *

9b. What is your regulatory strategy? *

Company Details

10. Have you raised funding? *

☐
Yes

☐
No

10a. What stage was your last round of funding? *

10b. How much did you raise in your last round? *

11. When do you expect to raise your next round of funding? *

12. How many FTEs do you have? *

13. How old is your company? *

Experience

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

☐

Yes

☐

No

14a. Which firms are you working with and on what? *

15. Are you working or have you worked with any of the following firms? (check all that apply) *

Alexion

AstraZeneca

Boehringer Ingelheim

Eli Lilly and Company

Novo Nordisk

Sumitovant

Takeda

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

Accelerator Participation

17. What are your goals for participating in the PharmStars accelerator? *

18. Have you participated in any other accelerators? *

☐

Yes

☐

No

18a. If so, which accelerator(s)? *

19. Who will represent your company in PharmaU? List two representatives. (Please note: PharmStars requires CEO and/or other senior level executive participation.) *

20. Are both people listed above aware this application is being submitted and available to participate in PharmStars as described in the Program Terms? *

☐ Yes ☐ No

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

Friend News Article PharmStars Alumni
Search Engine Social Media

21a. In which news article(s) did you hear about PharmStars?

22. 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

23. You will be added to our mailing list to receive updates about PharmStars and news about future cohorts. If you do not wish to receive PharmStars updates, you may opt out below:

☐
Please do not add me to the mailing list.

Additional Information

24. Please upload your pharma pitch deck here: *

25. We would appreciate learning more about you and your company. Please record a 1-minute video about your company and why you would like to participate in PharmStars. Upload to YouTube or Vimeo and share the link here. Be sure the privacy settings are set to allow us to view your video. *

26. Anything else you would like to share?

The Submission Process

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

Your application must be submitted by 11:59 p.m. ET on February 4, 2022 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 March 8, 2022. Startups selected to participate will have up to three (3) days to accept their spot in the program.

This PharmStars cohort will commence with a mandatory, in-person cohort launch event on March 21-22, 2022 in Boston, MA. Please hold this date to ensure you can attend should your startup be selected to participate.

Classes will meet virtually every Monday and Thursday from 12-2 p.m. ET March 28 - May 26, 2022. Please ensure that you are available to attend all the twice-weekly classes.

Thank you for applying to PharmStars!

Please contact support@PharmStars.com with technical questions and info@PharmStars.com for general questions.