## **Application Proforma Application Instructions**

Thank you for your curiosity about our Business Incubation Centre (BIC). Please note the instructions for your application as below:

- 1. The BIC will support business start-ups upto a period of 1 year that may be extendable.
- 2. The form should be completed by the Principal Applicant or Owner of the business.
- 3. Applicants must have a legal business or business idea.
- 4. Applicants must have a business plan and ready to share with Selection Committee.
- 5. Application with asked documents (Business Plan, Legal Status, CNIC, etc.) should be submitted electronically to bic@nu.edu.pk
- 6. Applicants are required to provide name and contact details of a guarantor.
- 7. Successful applicants must abide by the BIC terms and conditions and sign the agreement for use of the University before facility access.
- 8. Shortlisted applicants will be informed within 14 days after submission of the application.
- 9. Please ensure that all sections of the proforma are duly completed. Indicate NA (not applicable) where appropriate.

| Reference No: |  |                | Date:                      |                        |  |  |  |  |
|---------------|--|----------------|----------------------------|------------------------|--|--|--|--|
|               |  |                | <b>Business Incubation</b> | a Centre               |  |  |  |  |
|               |  |                | Application                |                        |  |  |  |  |
|               | (Information submitted will be held in confidence) |                |                            |                        |  |  |  |  |
|               | Section I: Basic Information                       |                |                            |                        |  |  |  |  |
| 1.            | Name of Principa                                   | l Applicant:   |                            |                        |  |  |  |  |
|               | Date of Birth:                                     | 11             |                            |                        |  |  |  |  |
| 3.            | CNIC:  |                |                            |                        |  |  |  |  |
| 4.            | . NTN (if available):                              |                |                            |                        |  |  |  |  |
| 5.            | . Cell Number:                                     |                |                            |                        |  |  |  |  |
| 6.            | . Email ID:  |                |                            |                        |  |  |  |  |
| 7.            | . Last Academic Degree:                            |                |                            |                        |  |  |  |  |
| 8.            | . Specialization:                                  |                |                            |                        |  |  |  |  |
| 9.            | Current/Last Job Title:                            |                |                            |                        |  |  |  |  |
| 10.           | Postal Address:                                    |                |                            |                        |  |  |  |  |
| 11.           | Permanent Addres                                   | ss (Parental R | esidence - if differen     | t from above):         |  |  |  |  |
| 12.           | Guarantor's Name                                   | e:             |                            |                        |  |  |  |  |
| 13.           | Guarantor's CNIC                                   | C:             |                            |                        |  |  |  |  |
| 14.           | Guarantor's Conta                                  | act number:    |                            |                        |  |  |  |  |
| 15.           | Guarantor's Posta                                  | l Address:     |                            |                        |  |  |  |  |
|               |  | Se             | ection II: Venture S       | napshot                |  |  |  |  |
| 16.           | Project / Business                                 |                |                            | -                      |  |  |  |  |
|               | Project Domain                                     |                |                            |                        |  |  |  |  |
|               | •  | (2) Health     | (3) IT Services            | (4) Telecommunications |  |  |  |  |
|               | (5) Agriculture                                    | (6) Renewab    | le Energy                  | (7) Other (Mention)    |  |  |  |  |

18. Legal Status: (1) Sole Proprietorship (2) Limited Company

(3) Partnership

| Title  | e<br>   | Organizat                                  | tion  |
|--|---|--|---|
|  |   |  |   |
| U: (1) Faculty<br>Service:   | (2) Student   | (4) Alumni                                 | (4) NA  |
| for: opment with marketing) es explored / approacl Section III: Incuba | hed?<br>tor Requireme   |  |   |
| / changeover of emp  | loyees working  | in the Incubato                            | r?  |
|  |   | office equipmen                            | nt in the   |
| formation provided in  | n this application  |  | nd correct to the   |
|  |   |  |   |
| tine for in  | Title  (1) Faculty Service:  us of product or serveline of product serveline of product servel segment or segment or: pment with marketing) s explored / approact Section III: Incubar / changeover of employer any equipment other our business? Please on IV: Declaration formation provided in | Title  ——————————————————————————————————— | U: (1) Faculty (2) Student (4) Alumni Service:  us of product or service (Idea / Prototype / Patent): eline of product service development (6/12/18 monet segment or segments:  or: pment with marketing) s explored / approached?  Section III: Incubator Requirements / changeover of employees working in the Incubato any equipment other than standard office equipment our business? Please explain.  on IV: Declaration by Principal Applicant formation provided in this application form is true and |

NOTE: Please attach or mail application with business pian and s project literature, and management team biographies to:

\*\*Director ORIC\*\*

4rd Floor (Incubator), FAST House,

## Rohtas Road, G-9/4 Islamabad (44000) Pakistan.