**« Hub4AIM PoC-Day 5th Edition » - Thursday 3 June 2021 - Online**

*Proof of concept of an innovative medical device*

Deadline: 20 May 2021 – *To be completed in French or English*

*Non confidential information (a NDA can be signed if necessary – please send us an email to contact@hub4aim.com)*

**PROJECT NAME**: ……………………………………………………………………………………………………………………………………………

**COMPANY**

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| Name: ……………………………………………………………………………………  Creation date: ………………………………………………………. ……………… or □ In the process of being set up  CEO: ……………………………………………………...................………………  Number of employees: ……………..............................………………  Size: □ Large Enterprise □ SMB □ SME □ Very Small business  Start-up: □ YES □ NO  Domain of activity: ………………………………………………………………… |

**CONTACT DETAILS OF THE PROJECT PROMOTER**

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| Your name: …………………………………………………………………...…………………………………………………………………….……………  Your function/position within the company: …………………………………………………………………….………………….……………  Your email address: …………………….............................……………………………….……………………….………………….……………  Phone number: ……………...............................................……………………….……………………….……………………….…………… |

**TARGET MEDICAL NEED AND MARKET**

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| Medical need targeted: ………………….……………………………………………………………………………………………………...............…  Targeted market:………………………………………………………. Figures (if available):……………………………………..............….  ……………………………………………………………………………………………………………………………………………………...............…………. |

**PROJECT**

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| Project and Medical device description (10 lines max):  ……………………………………………………………………………………………………………………………………………………...............………….  ……………………………………………………………………………………………………………………………………………………...............………….  ……………………………………………………………………………………………………………………………………………………...............………….  ……………………………………………………………………………………………………………………………………………………...............………….  ……………………………………………………………………………………………………………………………………………………...............………….  ……………………………………………………………………………………………………………………………………………………...............………….  Partnerships (optional): □ Hospital............... □ Academic............... □ Consultant............... □ Company...............  Proof of concept state of progress  □ Laboratory prototype  □ In vitro test  □ Pre-clinical validation  □ Clinical validation |

**PRE-INDUSTRIALIZATION NEEDS**

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| What are your needs regarding pre-industrialization?………………………………………………………………………..................…  ………………………………………………………………………………………………………………………………………………………….................…..  ………………………………………………………………………………………………………………………………………………………….................….. |

**Do you want to sign a NDA before your project presentation? □ YES □ NO**