



INDIAN SCIENCE & TECHNOLOGY ENTREPRENEURS PARKS & BUSINESS INCUBATORS ASSOCIATION (ISBA)

(A Registered Society under Societies Registration Act)

GSTIN: 09AAATI6529E1ZN | PAN: AAATI6529E

PRIMARY MEMBER APPLICATION FORM - 2020-2021

Primary Membership is only for those organizations that have a thorough and well defined incubation support for startups / entrepreneurs - infrastructure, period of engagement and support services.

1. Name of Incubator:

2. Name of Promoting (host) Organization:

3. Establishment supported by:

a. Whether supported by (scanned copy of sanction letter to be provided):

DST ☐ DBT ☐ MeiT ☐ AIM ☐ Other Central Govt. ☐ State Govt. ☐

b. If not supported by above please enclose nomination letter from **any two Existing primary members** of ISBA (nomination form is available as Annexure).

4. Year of Starting the Incubator / Incubation programme:

5. Legal Status of Incubator: Society / Trust / Section 8 Co. / Pvt. Ltd. / Pub. Ltd. / None of these

6. Address for Communication (including URL):

7. Details of contact person(s) [Primary & Secondary contact]:

Name	Designation	Email ID	Mobile Number

8. DETAILS OF INCUBATION SUPPORT:

- Total Area available in sq.ft. with the Incubator:
- Dedicated 'working' area being **provided to startups** in sq.ft.:
- Common area incl. discussion room(s), cafeteria, lounge, event area etc. in sq.ft.:
- Contract / Incubation period with startups in months:
- Is the contract renewable if YES how many times:
- Startups / Entrepreneurs supported till date:



INDIAN SCIENCE & TECHNOLOGY ENTREPRENEURS PARKS & BUSINESS INCUBATORS ASSOCIATION (ISBA)

(A Registered Society under Societies Registration Act)

GSTIN: 09AAATI6529E1ZN | PAN:AAATI6529E

g. Details of technical support being provided:

S.No.	Services	YES/NO
1	Dedicated Internet facility	
2	Dedicated Software facility	
3	Laboratories / Equipment [exclusive for Incubator]	
4	Technical experts (in-house)	
5	Technical experts (external) – if any formal engagements exist	

h. Mentoring / Knowledge Support:

S.No.	Mentorship Details	YES / NO / PARTIAL
1	Dedicated one to one mentoring of startups (on-site)	
2	Common mentoring sessions	
3	Is List of mentors accessible to all startups	
4	Mentors on retainership fee / equity model	
5	Training / Workshops on relevant topics	

i. Funding Support:

S. No.	Support Details	YES / NO / PARTIAL
1	Access to Investors	
2	Do invest in startups by themselves	
3	Any seed fund support	
4	Any corporate tie up	
5	Loan assistance from Banks	

11. HAVE YOU BEEN A MEMBER of ISBA before (mention last year):

☐ YES

☐ NO

Signature, Date & Seal of Organization

PLEASE SEND THE FOLLOWING BY RETURN EMAIL TO: manager@isba.in

1. Scanned copy of the Application Form
2. Certificate of Registration of Incubator
3. If Non-Govt. Incubator - Two scanned nomination forms from Existing Primary Members of ISBA
4. If Govt. approved - scanned copy of the Sanction letter



INDIAN SCIENCE & TECHNOLOGY ENTREPRENEURS PARKS & BUSINESS INCUBATORS ASSOCIATION (ISBA)

(A Registered Society under Societies Registration Act)

GSTIN: 09AAATI6529E1ZN | PAN:AAATI6529E

ANNEXURE

NOMINATION FORM FROM EXISTING ISBA PRIMARY MEMBER

Primary Members of ISBA are requested to fill in the below form, in order to admit non-government supported Incubators to become Primary Members of ISBA.

It may be noted that applicant organization should have the requisite infrastructure (space & facilities) and a well-defined incubation support for startups / entrepreneurs, for them to be eligible for Primary Membership of ISBA.

1. Name of the Primary Member Incubator: _____

2. Name & details of the Head / In-Charge of the Incubator:

Name: _____ Mobile No.: _____

3. Do you know this organization and since how many years: YES / NO & _____ years

4. Do you know the founder of this organization and his background: YES / NO

5. Have you visited the applicant's Incubation facility: YES / NO

If "NO" – How did you come to know them _____

6. Are you satisfied with the organization for incubation support providing to the startups: YES / NO

7. Any additional comments:

We have gone through the application form and M/S _____
IS NOT / IS recommended to be inducted as "Primary" Member of ISBA.

Name:

Designation:

Signature:

Date:

Seal: