**Application form Life Science Venture Market**



**Please return to:** wieseke@stiftung-charite.de

|  |  |
| --- | --- |
| Contact person: |  |
| Address: |  |
| Telephone: |  |
| E-mail: |  |
| Web: |  |

Information about the company

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sector of activity: |  | | | |
| Information about the (future) market: |  | | | |
| USP: |  | | | |
| Existing partners/ shareholders: |  | | # staff: |  |
| Legal form: |  | | | |
| Turnover: | 2016 | 2017 | 2018 | |
| (TEUR) |  |  |  | |

Note: If desired, please attach additional information such as pitch decks or a business plan to this document.

|  |  |
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| What type of support are you looking for? |  |



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