

INVOHub Application

Core Facilities

		CONTACT INFORMATION	N	
Primary Contact Name Title Email Phone			Faculty PI Name Title Department	
		COMPANY INFORMATIO	N	
Company Name, if any Year of Incorporation		<u></u>	Company Website	
Company Description (2-3 sentences)				
Stage of your Technology	Concept	_ Prototype D	Developed Product	
	INT	ELLECTUAL PROPERTY ST	ATUS	
Relevant IP (List NU Numbers)				
Current relationship with NU	Licensee	Optionee	In Negotiations	
Main INVO Contact				
		CORE FACILITIES NEEDS		
	Core Facility Name		Brief Description of Services Needed	
Anticipated list core facilities				
			-	
Describe your specified project goals with respect to using the Core Facilities				
		SIGNATURES		
Primary Contact		Signature Printed Name	Date	
Faculty PI		Signature Printed Name	Date	
		FOR INTERNAL USE		
	□ INVO Approval	☐ Finance/Operations	□ Conflict of Interest	