2024 Indiana Technical Assistance Program (INTAP) Practice Application

NOTE: This document is intended to help business owners organize their application materials and is for preparation purposes only. Filling out this document does NOT count as an official INTAP application. To submit an INTAP application, please visit isbdc.org/tech-commercialization to apply online. Final application questions are subject to change.

Thank you for your interest in the Indiana Technical Assistance Program (INTAP), an annual program of the Indiana Small Business Development Center. Each year, INTAP helps small Indiana businesses complete growth and improvement projects by providing up to \$15,000 for services from a qualified professional and technical vendor. INTAP helps small businesses secure the necessary expertise, skills, or qualifications needed to execute these projects. Before you begin, please review the program website for eligibility requirements, eligible project types, and frequently asked questions. We recommend gathering the following materials before beginning the application. If the following materials are gathered this application will take approximately 30 minutes to complete:

- Vendor contact information
- Vendor proposal with project budget

If you have any additional questions about the application, please contact your local Indiana SBDC office.

Applicant business is or will have a physical presence in the state of Indiana.

Yes / No

Applicant is or will become a for-profit business entity registered with the Indiana Secretary of State.

Yes / No

Applicant is or will become a client of the Indiana Small Business Development Center (SBDC). There is no cost to become a client of the Indiana SBDC. If you are not yet a client, please review the <u>program website</u> FAQ section to learn how to become a client of the Indiana SBDC and for eligibility deadline.

Yes / No

Applicant will use a vendor physically located in Indiana to complete the INTAP project. The Vendor must be a person or business independent from the applicant that is also registered as a business entity with the Indiana Secretary of State.

Yes / No

Applicant business has not received INTAP funding twice before. Businesses are eligible to receive funding for up to two projects. Limit one per year.

True / False

Which category best describes your project type?

- Prototype Development / Product Testing / Product or Service Development
- Innovation Grant Research, Technical Assistance, and Implementation (SBIR/STTR, Value Added Producer Grant, etc.)
- Business Operations Improvement (Lean 6 Sigma, CMMC, Inventory Control Systems)
- Upskilling Staff / Training Program Creation
- Certifications for Quality Control (ISO, GMP, QMS, CMMC 2.0, etc.)
- Trademarking and Patent Securing Services
- Software Development / Implementation (Cloud integrations, Inventory and POS tracking systems, Browser Extension Tools, Automations)

Reminder: You must upload a project proposal from your selected vendor to complete this application. The proposal must include a budget.

Would you like to proceed?
Yes/No
BUSINESS INFORMATION
Business Name
Short Answer
Short Description of Business
Short Answer (300 characters or less)
Business County of Operation
Select Option

Has your business been negatively impacted by Covid-19?

Negative Impact is not required. Negative impact can include supply chain issues, revenue loss, workforce shortages, etc.

Yes/No

CONTACT INFORMATION

Contact information provided will be the applicant's main point of contact throughout the application process and, if selected, the project. The listed contact must be an essential position within the business.

Key Contact First Name	
Short Answer	
K. Carlada Maria	
Key Contact Last Name	
Short Answer	
Title (i.e., CEO, Technical Off	icer, etc.)
Short Answer	
Email	
Short Answer	
Phone Number	
Short Answer	
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PROJECT PROPOSAL

Description

Describe your proposed project in detail. Include a concise explanation of the identified problem, the proposed solution, and any elaboration necessary to provide a better understanding of the project.

Long Answer (2000 character limit)

Project Impact

Describe how successful completion of your proposed project would positively impact your business. Impact can include an increase in sales or production, new sales channel, better workflow, or hiring new employees.

Long Answer (600 character limit)

Timeline

Describe the timeline to complete your proposed project if it receives INTAP funding.

Long Answer (1300 character limit)

Performance Measures

Describe how you will measure the success of your proposed project if it receives INTAP funding.

Long Answer (600 character limit)

Estimated Financial Costs

Describe the total estimated costs to complete your proposed INTAP project in detail.

Long Answer (600 character limit)

INTAP Funds Requested

Enter the amount of INTAP funds requested for your proposed INTAP project.

Reminder: INTAP can provide up to \$15,000.

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Request Rational

Describe how the funds would be used.

Long Answer (1300 characters)

Matching Funds

Describe the matching funds, if any, you will apply toward your proposed project. Matching funds of at least 50% of the INTAP funds requested, while not required, are strongly encouraged.

Long Answer (600 character limit)

VENDOR INFORMATION

Reminder: You must identify a vendor and provide a vendor quote to complete this application. If you need assistance finding a vendor, contact your Indiana SBDC regional office.

Vendor Business Name

Short Answer

Vendor Contact Name

Short Answer

Vendor Contact Email

Short Answer

Vendor Contact Phone	
Short Answer	
Short description of vendor services	
Long Answer (300 character limit)	
PROPOSAL UPLOAD	
Upload the project proposal from your vendor	•
Document upload	
Last Step	
How did you hear about INTAP?	
Short Answer	

SUBMIT

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