

# REVA NEST Technology Business Incubation Centre

## Application Form

Sl No	Particulars	Answers
1	Name : (First Name, Last Name)	
2	What is your Team size	
	Details of Employees with designation, Mail ID, Phone Number	
3	Name of the Directors of the company with their Contact Details (Email ID & Phone Numbers)	
4	Domain Area	
5	What facility that you need from the centre (other than shared space)	
6	You are at what stage of Product development (Tick the appropriate option)	<ul style="list-style-type: none"> <li>• Idea</li> <li>• Proof of Concept</li> <li>• Prototype</li> <li>• Pilot</li> </ul>
7	REVA NEST Incubation Phase (Tick the appropriate option)	<ul style="list-style-type: none"> <li>• Phase 1 – Pre Incubation</li> <li>• Phase 2 - Incubation</li> <li>• Phase 3 – Product development</li> <li>• Phase 4 - Start-up</li> </ul>
8	How many seats you want to take at REVA NEST?	

**Declaration:** I hereby declare that the information provide is true to best of my knowledge and we abide to the rules and regulations of REVA NEST.

Signature of the Applicant

Signature Director, REVA NEST

Date