

TABA Consulting Services Program FY24 Request for Service Questions

1: Company Name:

2: Award:

3: If your company does business under a trade name, has changed names since receiving your award, or has received federal assistance under any other names, please provide those names here.

4: Is the company a spin-off from a university/research institute? (If yes, please list the name(s) of the university/research institute.)

5: Number of full-time employees

6: Number of part-time/consultant employees

7: *Optional* Please provide a brief overview of your company in 150 words or less.

8: CEO/President (Operational Lead), if not the PI

Name:

Title:

Phone:

Email:

9: Is the CEO/President also the grant PI?

10: Name of Contact for TABA Consulting Services

Name:

Phone:

Email:

11: Do you have a Board of Directors?

12: Do you have a Scientific Advisory Board?

13: Company Website

14: Provide your cumulative sales and service revenue, if any, over the past five years.

15: Detail the total capital the company has raised over the past 5 years in each category.
(in millions of USD)

16: What do you see as potential successful outcomes for your company?

17: Which of the following best describes the technology/products under development?

18: Which of the following phrases best describes the current development stage of your technology or product?

19: What is your anticipated FDA marketing pathway?

TABA Consulting Services Program FY24 Request for Service Questions

20: Identify the most advanced stage of FDA (or relevant Health Authority) interaction for your current product.

21: The TABA Consulting Services program provides support in the following four areas. Please select one of the areas below to indicate the area in which you are requesting support.

22: How many of each type of intellectual property cover your technology/product? For none, leave the entries blank.

Your Name (if different than TABA Consulting Services Point of Contact)

Name:

Phone:

Email:

The answers you provide to the following questions will be used to develop a draft Scope of Work for vendor solicitation. Please consider this use when entering your responses.

23: Describe the public health impact of the product/project for which you are requesting consulting services. Response limited to 50 words.

24: Why are you requesting the specific service selected above, and how will this contribute to your development of the NIH funded project/program? Response limited to 150 words.

25: What one specific outcome are you seeking through the TABA Consulting Services program? Response limited to 100 words.

26: What interim and final deliverables do expect to receive through the TABA Consulting Services program? Response limited to 150 words.

27: What qualifications and experience should a vendor possess and highlight to demonstrate their capability to create your desired deliverables? Response limited to 100 words.

28: Please include any work your company has done towards the goal of this request (include examples)

29: If you have a preferred vendor you would like to include for consideration in the vendor selection process, please include contact information below. **There is no guarantee of preferred vendors participating in this program.**

Vendor Name:

Vendor Point of Contact:

Point of Contact Email:

Point of Contact Phone Number: