

[Company Name]

YOUR LOGO  
HERE

# Startup Company Application

## COMPANY INFORMATION

Company name:	
Address:	
Web site address:	
Telephone number:	
VC Funding A:	
VC Funding B:	
VC Funding C:	

## CHECKLIST

<input type="checkbox"/>	Choose type of business entity. Business entity type: [Sole Proprietorship/LLC/Corporation]	
<input type="checkbox"/>	Date business started:	
<input type="checkbox"/>	Number of owners:	
<input type="checkbox"/>	Primary Product Application:	
<input type="checkbox"/>		
<input type="checkbox"/>	Product releases:	
<input type="checkbox"/>	Key Personnel:	
<input type="checkbox"/>	CEO:	
<input type="checkbox"/>	CTO:	
<input type="checkbox"/>	Number of designers and product focus:	
<input type="checkbox"/>	Expected EDA tool requirements:	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		