



EUROPÄISCHE UNION
Europäischer Fonds für
regionale Entwicklung



BioCon Valley®

Veranstaltet durch die BioCon Valley® GmbH im Auftrag des Landes Mecklenburg-Vorpommern

sponsored by

APPLICATION FORM

BALTIC SEA REGION HEALTH INNOVATION AWARD

of the National Conference on Health Economy (NCHE)

under the patronage of

Hon. Manuela Schwesig, Minister-President of the State of Mecklenburg-Vorpommern



We are pleased that you have decided to apply for BSR HEALTH INNOVATION AWARD 2020.

You may use this application form for the BSR HEALTH INNOVATION AWARD 2020 in two ways:

1. Please open this PDF document with Adobe Acrobat / Reader and fill in the prepared form fields (mostly in gray color) on the PC. Then save the PDF file on your PC and send the completed PDF (possibly with additional documents) in an email to hia@bcv.org.

or

2. Please print out this document, fill in the fields by hand and send us the application form (including any additional documents - please only copies, no originals !!) by post to the snail mail address of BSR HEALTH INNOVATION AWARD 2020.

When completing the form, please make sure that your innovation is described in an understandable, short and concise manner. Please use the fields we have prepared as a guide to illuminate the different aspects of your innovation.

WITH BEST WISHES FOR YOUR SUCCESS!

1. Title / short description of the idea

This information will be used for press work as well as the short presentation at the award ceremony used. Please describe in an understandable manner the working environment, the problem to be solved and roughly outline your innovative solution.

Please also send us a photo of your product, team, logo or similar to hia@bcv.org .



Title (max 150 characters):

Brief and easy to understand description:

2. Personal information (for a team: contact person)

Name:

Date of birth:

Adress:

State / Country:

Phone / Mail:

3 |

Further team members:

2. Name: Date of birth:

3. Name: Date of birth:

4. Name: Date of birth:

3. Information about the applicants institution / company

We plan to start a business based on this idea in the next few months.

We implement the innovation in an existing institution resp. company.

(Please mark)

Name company /
institution:

Founded (Date):

Legal entity:

Adress:

Country/State:

Business Sector:

4 |

4. The degree of innovation of your idea

Describe your innovative idea or the new process as understandably as possible. What exactly is innovative about your development, what goes beyond the current state of the art and what are the advantages for the user? Please indicate which other documents (photos, plans or similar) you have enclosed.

The innovation or business idea is (please check)

A product

A service

A process or
technology

Something
different

5. Technical feasibility

Describe how you want to put the idea or concept into practice. Which work steps have to be performed? Have you already tested the process in practice? Which challenges still have to be solved?

6. Market potential

What are your competitors and with which unique selling proposition or which strategy do you differentiate yourself from them? On what basis did you plan which sales? What growth rates do you forecast? Which sales channels do you want to use?

7. Cooperation Partners

Did you have partners when developing your idea? Which forms of cooperation have been incorporated so far and which ones are planned for practical implementation? Do you have the rights of commercial exploitation?

8. Conditions of participation

I / We have read and accept the BSR HEALTH INNOVATION AWARD 2020 conditions of participation (separate PDF).

I / We have important reasons why the title, short description and photo (1.) may not be published in deviation from the BSR HEALTH INNOVATION AWARD 2020 conditions of participation.

One final question ...

How did you find out about the BSR HEALTH INNOVATION AWARD 2020?

Date / Signature: