

# Letter of Interest for participation in the [INSERT NAME OF THE PROJECT]

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National Cybersecurity Center of Excellence (NCCoE)  
National Institute of Standards and Technology (NIST)  
9700 Great Seneca Highway  
Rockville, MD 20850

Re: Proposed Contributions to Support the National Cybersecurity Center of Excellence (NCCoE)  
[INSERT NAME OF THE PROJECT] Project

OMB Control No. 0693-0075

Expiration Date: December 31, 2021

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0693-0075. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to NIST NCCoE, 9700 Great Seneca Highway, Rockville, MD 20850, Attn: Keri Bray, [keri.bray@nist.gov](mailto:keri.bray@nist.gov).

The results from these data collection activities are not intended for general publication, however the results will/may be disseminated to NIST staff, key policy and management officials.

[Responding Organization's Name] voluntarily agrees to provide to the National Institute of Standards Technology (NIST), the contribution identified in the Attachment to this letter of interest. This letter certifies that the capabilities identified below are satisfied by our proposed contribution to the project.

[Responding Organization's Name] certifies that contribution(s) satisfy(ies) the following characteristics as described in the Project Description (see: [INSERT URL FOR THE PROJECT] for additional details).

## 1. Acceptance of Conditions

- 1.1 The contribution is commercially available, including all component hardware, software, documentation, and services (i.e., installation, configuration, training) required to accomplish the project objectives.
- 1.2 The contribution addresses one or more of the relevant components necessary to address the challenge. See section 6 of the project description.
- 1.3 The contribution addresses one or more of the desired solutions characteristics in section 3 of the project description.

## 2. Terms and conditions

- 2.1 The Respondent will not, in any way, imply that this Letter of Interest is an endorsement of any such product or service.
- 2.2 Respondent understands that, should its product(s) be accepted, the respondent will need to enter into a Cooperative Research and Development Agreement (CRADA) with NIST.

## 3. Description of Respondent's Area of Interest

Please identify in the Attachment your organization's name, address, and country of origin if headquarters do not reside in the United States and your stakeholder area of interest. The description of the area of interest should not exceed 500 words. Some examples of potentially useful descriptive information are provided as follows:

- A URL with additional information about the product(s)
- Product name(s) and specific identifier of the product(s) (e.g. version number, last release of product)
- Level of effort necessary for installation, configuration and training of [Responding Organization's Name] product(s)
- Identification of component(s) listed in the FRN included in [Responding Organization's Name] proposed contribution
- List of desired solution characteristics identified in the [INSERT NAME OF THE PROJECT] description that the recommended contribution addresses
- Point of Contact (POC) for CRADA activities

By signature below, I certify that all of the information provided above is accurate and complete to the best of my knowledge.

Sincerely,

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Date: \_\_\_\_\_

Attachment

**Respondent's Contribution to the National Cybersecurity Center of Excellence [INSERT NAME OF THE PROJECT] Project**

Name:

Organization:

Address:

City:

State:

Zip Code:

Country:

Telephone Number:

Electronic Mail Address:

Respondent's Area of Interest: