

National Science Foundation (NSF) Innovation Corps (I-Corps™) Pre-Course Survey

Overview

Pursuant to 5 CFR 1320.5(b), an agency may not conduct or sponsor, and a person is not required to respond to, an information collection unless it displays a valid Office of Management (OMB) control number. The OMB control number for this collection is 3145-XXXX.

The survey collects information on the I-Corps Program participants and their team's technologies that are being evaluated in the I-Corps Projects. Public reporting burden for this collection of information is estimated as 5-10 minutes per survey response, including the time for reviewing instructions.

Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing this burden, to: Suzanne H. Plimpton, Reports Clearance Officer, National Science Foundation, 2415 Eisenhower Ave., Suite W18200, Alexandria, VA 22314; telephone (703) 292-7556; or send email to splimpto@nsf.gov.

Section I. Program Participant

1. What is your name?

Last Name:

First Name:

2. What is your role in the I-Corps team? *Select one.*

- Entrepreneurial Lead
- Technical Lead/Principal Investigator
- Mentor

3. Which best describes your current occupation? *Select one.*

- Graduate student
- Undergraduate student
- Postdoctoral researcher/scientist
- Faculty member
- Startup employee/management
- Other (please specify)

4. How did you *first* learn about the NSF I-Corps program? *Select one.*

- University/Academic Department/Technology Transfer Office
- NSF.gov
- NSF Outreach Activities
- Conferences/Seminars
- Personal or Professional Networks
- Industry (host) Organizations
- Web Search
- Social Media
- Other (please specify)

5. Have you participated in any of the I-Corps Programs before? *Select all that apply.*

- Yes, the *National* I-Corps Program
- Yes, the *Regional* I-Corps Program
- No, I have not participated in any I-Corps Program before

6. Which of the following best describe your familiarity with entrepreneurship? *Select all that apply.*

- I am/was a (co-)founder of a startup company
- I have taken at least one university course on entrepreneurship
- I have participated in an accelerator/incubator program
- I have no experience with entrepreneurship
- Other (please specify)

II. Your Team.

7. The name we have associated with your team is _____. Is this correct?

- Yes
- No

8. [If 'No' to Question 7] Please provide the name of your team/project.

Team/Project name:

9. What is the URL of your team's website, if any?

Website URL:

III. Core Technologies.

This section pertains to the *technology* that is currently being evaluated in your I-Corps Project.

10. Has the team disclosed the *technology* to an University Technology Transfer Office?

- Yes
- No

11. Have any patent applications been filed based on this *technology*?

- Yes
- No → Proceed to Question 14

12. [If 'Yes' to Question 11] How many patent applications have been filed?

- Number of patent applications filed:
- Patent application numbers (optional):

13. [If 'Yes' to Question 11] How many patents have been issued based on this *technology*?

- Number of patents issued:
- Patent number (optional):

14. Has this *technology* been licensed to a company that either you and/or your team formed?

- Yes → Proceed to Question 17
- No

15. [If 'No' to Question 14] Has this *technology* been licensed to another company?

- Yes → Proceed to Question 17
- No

16. [If 'No' to Question 15] How likely will your team license the *technology* in the next 12 months?

- Very unlikely
 - Unlikely
 - Neither unlikely nor likely
 - Likely
 - Very likely
- }

17. Have any peer-reviewed articles been published under this *technology*?

- Yes
- No → Proceed to Section IV

18. [If 'Yes' to Question 17] How many peer-reviewed articles have been published?

- Number of peer-reviewed articles published:

IV. Company.

19. Has a company been founded based on this *technology*?

- Yes → Proceed to Question 21
- No

20. [If 'No' to Question 19] Within the next 12 months, how likely will your team start a company based on this *technology*?

- Very unlikely
- Unlikely
- Neither unlikely nor likely
- Likely
- Very likely

Proceed to Section V

21. [If 'Yes' to Question 19] What is the name and website (if any) of the company?

Company name:

Company URL:

22. [If 'Yes' to Question 19] In which year was the company founded?

Year founded:

23. [If 'Yes' to Question 19] How many employees (including yourself) draw a salary from the company?

Number of employees drawing a salary:

24. [If 'Yes' to Question 19] Has the company received any investments for the development of this *technology*?

- Yes
- No → Proceed to Section V

25. [If 'Yes' to Question 24] What kind of investment has the company received?

Select all that apply.

- Private Investment
- Public Investment

V. Participant's Demographics.

26. What is your sex? *Select one.*

- Male
- Female
- Do not wish to provide

27. Are you of Hispanic, Latino, or Spanish origin? *Select one.*

- Yes
- No
- Do not wish to provide

28. What is your race? *Select all that apply.*

- Asian
- American Indian or Alaska Native
- Black or African American
- Native Hawaiian or other Pacific Islanders
- White
- Do not wish to provide

29. What is the USUAL degree of difficulty you have with...

Select one in each row.

	None	Slight/Moderate	Severe	Unable to do	Do not wish to provide
SEEING words or letters in ordinary newsprint (with glasses/contact lenses, if you usually wear them)					
HEARING what is normally said in conversation with another person (with hearing aid, if you usually wear one)					
WALKING without human or mechanical assistance or using stairs					
LIFTING or carrying something as heavy as 10 pounds, such as a bag of groceries					
CONCENTRATING, REMEMBERING, or MAKING DECISIONS because of a physical, mental or emotional condition					

30. Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

Select one.

- Never served in the military
- Only on active duty for training in the Reserves or National Guard
- Currently on active duty
- On active duty in the past, but not now
- Do not wish to provide