**National Science Foundation Innovation Corps (I-Corps™) Longitudinal Survey (6/18/36 months after participation)**

**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 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 core technologies that are being evaluated in the I-Corps Projects. Public reporting burden for this collection of information is estimated as 10-12 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*](mailto:splimpto@nsf.gov) *.*

**I. Status Updates**

**1. This survey asks about your experience as a Role in I-Corps Team with team: \_\_\_\_\_\_\_\_\_ in**

**the I-Corps Program. Is this information correct?**

* Yes
* No

**2. [If ‘No’ to Question 1] Please provide the correct information.**

**Role in I-Corps Team**: Entrepreneurial Lead/Mentor/TL/PI

**Team/Project name**:

**3. To the best of your knowledge, is the technology behind the I-Corps Project still active?**

* Yes
* No

***Skip to Section IV***

* Not sure

**4. [If ‘Yes’ to Question 3] After the I-Corps course ended, have you continued to be involved with the I-Corps Project?**

* Yes, I have continued to be involved with the I-Corps Project
* Yes, only for a short while, but I am no longer involved with the I-Corps Project

***Skip to Section IV***

* No, I stopped being involved with the I-Corps Project after the course ended

\* *If respondent answered either*

* *‘No’ or ‘Not sure’ to question 3, or*
* *second response of ‘Yes’ to question 4, or*
* *‘No’ to question 4*

*then the respondent will skip over Sections II and III of the survey and proceed directly to Section IV.*

**Section II. Technology behind the I-Corps Project.**

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

**5. Since participation in the I-Corps Program, has the team disclosed the *technology* to an University Technology Transfer Office?**

* Yes
* No
* The team disclosed the technology *prior* *to* or *during* the participation of the I-Corps Program.

**6. Since participation in the I-Corps Program, have any patent applications been filed based on this *technology*?**

* Yes
* No
* The team filed patent application(s) based on the technology *prior to* or *during* the participation of the I-Corps Program.

**7. [If ‘Yes’ to Question 6] How many patent applications have been filed?**

Number of patent applications filed:

Patent application number (optional):

**8. [If ‘Yes’ to Question 6] How many patents have been issued based on this *technology*?**

Number of patents issued:

Patent number (optional):

**9. Since participation in the I-Corps Program, has this *technology* been licensed to a company that either you and/or your team formed?**

* Yes
* No
* The technology was licensed to a company that we formed *prior to* or *during* the participation of the I-Corps Program.

**10. [If ‘No’ to Question 9] Has this *technology* been licensed to another company?**

* Yes
* No

**11. [If ‘No’ to Question 10] How likely will your team license the *technology* in the next 12 months?**

* Very unlikely
* Unlikely
* Neither unlikely nor likely
* Likely
* Very likely

**12. Since participation in the I-Corps Program, have any peer-reviewed articles been published under this *technology*?**

* Yes
* No
* One or more peer-reviewed articles have been published under this technology *prior to* or *during* the participation of the I-Corps Program

**13. [If ‘Yes’ to Question 12] How many peer-reviewed articles have been published?**

Number of peer-reviewed articles published:

**14. Since participation in the I-Corps Program, has your team established a problem-solution fit (identifying customer segments, establishing value propositions) for the *technology*?**

* Yes
* No

**15. Since participation in the I-Corps Program, has your team established a product-market fit (validating all the criteria in the Business Canvas Model) for the *technology*?**

* Yes
* No

**Section III. Company.**

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

* Yes
* No

**17. [If ‘No’ to Question 16] Within the next 12 months, how likely will your team start a company based on this *technology?*  *🡪 Proceed to Section IV***

* Very unlikely
* Unlikely
* Neither unlikely nor likely
* Likely
* Very likely

**18. [If ‘Yes’ to Question 16] What is the name and website (if any) of the company?**

Company name:

Company URL:

**19. [If ‘Yes’ to Question 16] In which year was the company founded?**

Year founded:

**20. [If ‘Yes’ to Question 16] How many employees (including yourself) draw a salary from the company?**

Number of employees drawing a salary:

**21. [If ‘Yes’ to Question 16] Has the company applied for the Small Business Innovation Research (SBIR)/Small Business Technology Transfer (STTR) funding?**

* Yes
* No

**22. [If ‘No’ to Question 21] Will the company apply for SBIR/STTR funding in the next 12 months?**

* Yes
* No ***Proceed to Question #26***

**23. [If ‘Yes’ to Question 21] To which agency did the company apply for the SBIR/STTR funding?**

*Select all that apply.*

* National Science Foundation
* Department of Agriculture
* Department of Commerce
* Department of Defense
* Department of Education
* Department of Energy
* Department of Health and Human
* Department of Homeland Security
* Department of Transportation
* Environmental Protection Agency
* National Aeronautics and Space Administration
* National Institute of Standards and Technology
* National Oceanic and Atmospheric Administration
* National Institutes of Health
* Other – please specify

**24. [If ‘Yes’ to Question 21] Has the company received any SBIR/STTR funding?**

* Yes
* No ***🡪 Proceed to Question #26***

**25. [If ‘Yes’ to Question 24] From which agency did the company receive the SBIR/STTR funding?**

*Select all that apply.*

* National Science Foundation
* Department of Agriculture
* Department of Commerce
* Department of Defense
* Department of Education
* Department of Energy
* Department of Health and Human
* Department of Homeland Security
* Department of Transportation
* Environmental Protection Agency
* National Aeronautics and Space Administration
* National Institute of Standards and Technology
* National Oceanic and Atmospheric Administration
* National Institutes of Health
* Other – please specify

**26. In addition to public investments, has the company *received* any private investments?**

* Yes
* No

**27. [If ‘Yes’ to Question 26] What kind of private investments did the company receive?**

*Select all that apply.*

* Friends and/or Family
* Angel Investors
* Venture Capital
* Other – please specify

**Section IV. Learning Outcomes.**

**28. Taking what you have learned in the I-Corps Program, how useful have you found the Program in each of the following activities?**

a) Determining future research plans

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

b) Assessing future innovations

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

c) Influencing your teaching

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

d) Enhancing your competitiveness for future employment

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

e) Improving your competitiveness for grant applications

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

f) Building your leadership skills

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

g) Increasing awareness of industry needs

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

h) Identifying solutions to industry problems

* Not useful
* Somewhat useful
* Very useful
* Too soon to tell
* Not applicable

**29. Again, thinking about what you learned in the I-Corps Program, how important would you rate the following activities in the commercialization of technology (yours, or in general)?**

a) Evaluating the industry needs of the technology/innovation

* Not important
* Somewhat important
* Very important
* Not applicable

b) Assessing the commercial value of the technology/innovation

* Not important
* Somewhat important
* Very important
* Not applicable

c) Validating the business model of the technology/innovation

* Not important
* Somewhat important
* Very important
* Not applicable

**Section V. Participant’s Demographics.**

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

* Male
* Female
* Do not wish to provide

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

* Yes
* No
* Do not wish to provide

**32. 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

**33. 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 |  |  |  |  |  |

**34. 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