## South Dakota Proof of Concept SBIR Supplement Application

#### **Purpose**

The SBIR/STTR Supplement program is to support SBIR/STTR awardees to enhance their Phase II application, bridge work between Phase I and Phase II and commercialize the results of the SBIR/STTR project. The goal is to increase the competitiveness of the SBIR/STTR Phase II proposal and successful commercialization of product developed with SBIR/STTR funding.

#### **Application Process**

- Complete the application form. Submit the application via email to the following individuals.
  - ➤ Stephanie Deyo <u>Stephanie.Deyo@state.sd.us</u>
- ❖ Application should be a maximum of 5-pages.
- ❖ Up to \$25,000 may be requested in the itemized budget. Budgets cannot be used to pay principals or family members of the submitting company. A 10% match by the company must be included in the budget. SBIR funds can be used to meet the match requirement.
- ❖ GOED Commissioner, staff and South Dakota SBIR Center Director will review the application and issue an award agreement if the application is approved.
- ❖ Applicants must be eligible to participate in the SBIR program.
- ❖ The awardee must provide documentation actual expenditures for which reimbursement is requested.
- Upon receipt of the documentation and approval then a final payment will be issued to the awardee.
- ❖ The awardee must notify GOED on the outcome of the SBIR/STTR application and project. If the federal agency does not fund the Phase II application and the applicant does not continue to pursue development of the project the awardee would have no obligation to repay the supplemental funds. If the federal agency does fund the Phase II application or the company continues to pursue commercialization of the project, the supplemental funds may be converted to a loan or equity at a later date.

### **Questions?**

If you have questions about the SBIR Phase 0 program, please contact Mel Ustad by phoning 605-670-1678.

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Company:				
Point of Contact:				
Job Title:				
Address:				
City:	St	ate:	Zip:	
Email:	<u> </u>			
Phone				
☐ Native American		□ Veteran		
Does the ownership of the company apply)	Tan into any of the	·	, ,	
☐ African American ☐ Native American		☐ Asian Pacific American		
☐ Hispanic		□ Women		
_ mspaine		□ Wom	ion	
We only work with businesses located are either <u>currently located in South</u> Yes		•		onfirm you
Federal Agency Making SBIR	Award:			
Federal Agency Name:				
SBIR Award # and dates:				
(Attach SBIR/STTR abstract)				

#### **Detailed Budget Worksheet**

Please itemize the budgeted expenses up to \$25,000 for your SBIR Supplement Proof of Concept request. If multiple items are budgeted under a category, the separate costs for each item must be provided. Please see the program guidelines for more details on allowable costs.

The required 10% match must also be itemized in the budget.

Include budget justifications for items including identification of individual's salary, wages and benefits to be supported with funds, equipment purchases, materials and supplies, travel and contractual costs. Documentation of the 10% cost share will be required in the final report.

	South Dakota	Applica		
Description	POC SBIR	Cash	In-kind	Total
Personal Services				
Fringe Benefits				
Travel				
Equipment				
Supplies				
Contractual				
Other				
Total Costs				

#### **Project Description**

Please provide the following information as an attachment (not to exceed 5 pages).

Abstract: Provide an abstract (150 words maximum) with the following information:

- What is the innovation?
- What is the competitive advantage?
- Qualifications of the team
- Impact for South Dakota

**Background:** List and briefly describe the objectives. Briefly review the current status of the proposed work and include any pertinent IP status (disclosure, ownership, licensing arrangement, etc.), business development, preliminary data and competition or barriers to market entry.

**Work Plan:** Clearly and succinctly describe the technical/scientific and business tasks to be done, identify who will do each task and provide a <u>timeline for completion</u> of each task with milestones used to determine success. Please include information as to the completion of Phase 1 and the submission of the Phase 2 application.

Commercialization Plan: Outline your plan for bringing the innovation to market, identify partners you plan to work with and include documentation of their interest or potential interest if your proof of concept research is successful. Clearly identify the economic impact on South Dakota's economy in terms of job creation, partnerships with existing SD firms, etc.

Biographical Sketch: One page bio for each participant (not included in the 5-page limit).

#### Letters

Letters of commitment and support from investor and commercialization partners are required (does not count against 5-page limit).

#### **Application Packet Must Include:**

Application form
Timeline
Budget
Project description
Letters & supporting documentation

#### **Submit Application To:**

The application should be submitted via email to the following: Stephanie.Deyo@state.sd.us