

# Louisiana Emerging Technology Center

**Application Form for Admission to the Center**



# ADMISSIONS APPLICATION

Please answer all questions on the application as completely as possible. Attach an additional page if necessary to complete the application. If a particular question does not apply to your business operation, write Not Applicable (NA) in the space provided. **THE APPLICATION MUST BE SIGNED, DATED AND NOTARIZED.**

The Louisiana Emerging Technology Center is designed to foster the development of new commercial ventures in agriculture, environmental and life science. To be admitted a company must be researching, developing or commercializing innovative new products or services. The company must be a privately held for-profit business with less than 30 employees.

The company must be amenable to advice from our selected business and technical advisors and agree to provide general financial, sales and employment information to the Louisiana Emerging Technology Center while occupying the Louisiana Emerging Technology Center and for 5 years after graduation from the Louisiana Emerging Technology Center. This information will not be published or made public in any way to identify specific information about an applicant without express permission.

## Balance Sheet (Must Complete)

ASSETS	LIABILITIES/NETWORTH
Cash on hand & in Banks.....\$ _____	Accounts Payable.....\$ _____
Accounts Receivable.....\$ _____	Tax Withholdings Due.....\$ _____
Furniture & Fixtures .....\$ _____	Loans (Except Owners).....\$ _____
Inventory.....\$ _____	Loans From Owners .....\$ _____
Intellectual Property.....\$ _____	Other Liabilities .....\$ _____
<b>Fixed Assets</b> .....\$ _____	<b>Total Liabilities</b> .....\$ _____
<b>Total</b> .....\$ _____	<b>Net Worth</b> (Total Assets minus Total Liabilities).....\$ _____
	<b>Transfer the Net Worth result to Application Form.</b>

**For more information, contact:**

Arthur R. Cooper  
 Executive Director  
 Louisiana Emerging Technology Center  
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# Louisiana Emerging Technology Center

## APPLICATION FORM FOR ADMISSION TO THE CENTER

BUSINESS INFORMATION							
Name of Business						Year Established	
Contact Person				Title			
Business Street Address							
City			State	ZIP Code		Parish	
Business Mailing Address (if different from above)				City		State	ZIP Code
Telephone Number			Fax Number			E-Mail Address	
Main Product or Service			Federal Tax ID			Number of Employees	
Total Annual Payroll		Business Net Worth		Annual Revenue		Net Profit (Loss)	
\$		\$		\$		\$	
<b>Business Structure (✓):</b> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> L.L.C. <input type="checkbox"/> Corporation <input type="checkbox"/> S-Corporation							

OWNERSHIP INFORMATION				
Name		% Ownership	% Voting	Personal Net Worth
Address				
Name		% Ownership	% Voting	Personal Net Worth
Address				
Name		% Ownership	% Voting	Personal Net Worth
Address				
Name		% Ownership	% Voting	Personal Net Worth
Address				

To include additional owners, please attach a separate page.

## BACKGROUND INFORMATION

1. Do you have a proprietary position in your technology?  **yes**  **no**, If yes, please explain:

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2. What percentage of ownership of your company is by a Louisiana resident(s)? \_\_\_\_\_

3. What percentage of your actual or anticipated sales will be outside Louisiana? \_\_\_\_\_

4. Do you have a business plan?  **yes**  **no**, if yes please attach a copy of the business plan and detailed financial statements, if no please attach a description of the applicant's business, including description of technology, marketing plan, management structure, competition and financial projections.

5. What percentage do you expect your sales to grow annually over the next 4 years? \_\_\_\_\_

6. How many employees do you expect to add over the next 4 years? \_\_\_\_\_

## AFFIDAVIT STATE OF LOUISIANA

**PARISH OF** \_\_\_\_\_

The undersigned states the he/she is the duly authorized representative of the applicant and the foregoing statements, including statements, data and attachments provided herein, are correct, true and include all material information necessary to identify and explain the operation of the applicant.

Further, the undersigned understands that false statements, omissions or material misrepresentation will be grounds for denial of admission and/or termination of occupancy in the Louisiana Emerging Technology Center. The undersigned further agrees to provide the Louisiana Emerging Technology Center any additional information requested including updated general financial, sales and employment information to the Louisiana Emerging Technology Center while occupying the Center and for 5 years after graduation from the Louisiana Emerging Technology Center and additionally authorizes Louisiana Emerging Technology Center to obtain information directly from the references listed, credit reporting agencies, Louisiana State agencies in response to Louisiana Emerging Technology Center's inquiries. If there should be any change in ownership or control of the applicant, or in any other material information submitted, the undersigned agrees to notify Louisiana Emerging Technology Center. The undersigned further acknowledges that the Board of the Louisiana Emerging Technology Center has the sole discretion in accepting or rejecting this application for occupancy notwithstanding any representation made by employees/agents of the Louisiana Emerging Technology Center.

Louisiana Emerging Technology Center agrees that any financial or proprietary business information submitted pursuant to the application which are in their nature and/or designated as confidential and submitted for the purposes of allowing Louisiana Emerging Technology Center to investigate or examine the applicant in connection with admission or continued occupancy of the Louisiana Emerging Technology Center shall be considered to be and maintained as confidential and proprietary information within the meaning of LA RS 44:4(3) and Louisiana Emerging Technology Center shall use all reasonable means to maintain such confidentiality, and shall not disclose such information to any third party except as permitted in this application or as required by law.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Printed or Typed)

\_\_\_\_\_  
Title

**SWORN TO AND SUBSCRIBED** before me, Notary, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**