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**PolyU – IDT Innovative Entrepreneur Contest**  
**Executive Summary Registration Form**

*Nourishing Tomorrow's Successful Entrepreneurs*

(Please read the section on Rules & Guidelines and Terms and Conditions before completing the application form)

**Business Plan Title:**

Please **tick** the category in which your team will compete in:

- |                     |   |
|---------------------|---|
| 1. IT & Health Care | 2. Telecommunication & Personal Devices |
| 3. Home Appliances  | 4. Toys                                 |
| 5. General          |   |

**Please describe the following:**

**Business Concept Overview** - Description of the business concept

**Product or Service** - Description of the product/service, its differentiation and competitive advantage (i.e. innovative idea, cost effectiveness and etc.). Briefly mention the competitive environment. Why is your technology/product/service significantly different or better than the one currently exists?

**Target Market** - Description of the targeted geographical market and size, identification of customer and discussion regarding ability to create barriers to entry and achieve sustainability

**Name(s) of all team members involved in this Contest:**

Name	Student No.	Department	Course/Year	Telephone	Email
Project Leader					

Please attach a brief resume of each member under separate cover and highlight any extra-curriculum activities, significant achievements and involvement in projects and the skill that each member will bring to the team.

**Team members' agreement (all team members must sign this agreement):**

- (i) All team members have read and understand the rules of the PolyU-IDT Innovative Entrepreneur Contest.
- (ii) Each member understands that the best effort has been made by the PolyU and its participants to ensure the confidentiality of each business / development plan.
- (iii) Each Contestant agrees to voluntarily release each PolyU's staff and its representatives from any further liabilities, responsibilities, and accountabilities relating to or arising out of their involvement in the PolyU – IDT Innovative Entrepreneur Contest.

Name	Signature	Name	Signature
Date:			

**Agreement from a university faculty member to act as the team's advisor**

I agree to be the Advisor of this contesting team to take part in the PolyU-IDT Innovative Entrepreneur Contest

Name	Signature
Dept	Position
Date	