



## FREDERICK INNOVATIVE TECHNOLOGY CENTER, INC (FITCI) PREFERRED SERVICE PROVIDER APPLICATION

### Contact Information

Contact Name (Last, First, MI)			
Company Name:			
Address		City	State
Zip			
Phone ( )	Best time to call Days:		Email:
Fax ( )	Evenings:		Website:

### Resource/Skills Information (Check all that apply)

<input type="checkbox"/> Accounting Services	<input type="checkbox"/> Insurance-Business	<input type="checkbox"/> Technology Transfer & Licensing
<input type="checkbox"/> Bookkeeping	<input type="checkbox"/> Lab Equipment & Supplies	<input type="checkbox"/> Temporary Staffing
<input type="checkbox"/> Business Consulting	<input type="checkbox"/> Legal Services-General	<input type="checkbox"/> Training & Development
<input type="checkbox"/> Business Plan & Development	<input type="checkbox"/> Marketing/Advertising/PR	<input type="checkbox"/> Other:
<input type="checkbox"/> Commercial Banking	<input type="checkbox"/> Office Furniture & Equipment	<input type="checkbox"/> Other:
<input type="checkbox"/> Computer Services & Support	<input type="checkbox"/> Patent Law	<input type="checkbox"/> Other:
<input type="checkbox"/> Employee Benefits (Health, Life, etc.)	<input type="checkbox"/> Payroll Servicing	<input type="checkbox"/> Other:
<input type="checkbox"/> Graphic Arts	<input type="checkbox"/> Strategic Planning	<input type="checkbox"/> Other:

### Approximate Times Available (Check all that apply)

<input type="checkbox"/> Daytime ( M T W Th F )	<input type="checkbox"/> Evenings ( M T W Th F )	<input type="checkbox"/> Weekends
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### Further Information

Please describe the pro bono or discounted services that your company is willing to offer to each *FITCI* company that might need your services and explain how much you will offer per company (# hours, specific services, \$ value, etc.).

### References

Please offer 2 client references that we may contact, including *FITCI* clients, if possible.

Name (Last, First, MI)	Phone:
Address (Street, City, Zip)	Email:
Name (Last, First, MI)	Phone:
Address (Street, City, Zip)	Email:

### Preferred Service Provider Referrals

Please recommend someone else we should contact to become part of the Preferred Service Provider.

Name (Last, First, MI)	Phone:
Business Name:	Fax:
Address (Street, City, Zip)	Email:

Would you like us to add your company's logo to *FITCI's* Preferred Service Provider page? YES NO

***Are you interested in Sponsorship Opportunities?*** ***Yes No***



## **FREDERICK INNOVATIVE TECHNOLOGY CENTER, INC (FITCI) PREFERRED SERVICE PROVIDER APPLICATION**

Thank you for your interest in participating as a FITCI **Preferred Service Provider**. FITCI facilitates the growth and development of emerging technology companies by providing them with facilities and business and technical assistance to make their technology-based ventures succeed.

By participating as a FITCI **Preferred Service Provider**, you are showcasing your company's services/products before an audience of technology start-up companies eager to initiate relationships with service providers. In return for this free placement, FITCI asks that your company offer a pro bono or discounted service/product package as an incentive to FITCI tenant and virtual companies.

The process for submitting a *Preferred Service Provider* application is easy.....

- Complete the attached form and return to FITCI by mail or fax (301) 644-3939 OR complete the form on the FITCI website at <http://www.fitci.org/PSPA>.
- The FITCI Training & Development Team will review your application and make a recommendation for approval. A FITCI representative may contact you to obtain additional information regarding your service/product package.
- Your application will then be presented to the Executive Director for approval.
- If your application is approved, your company's listing will be activated in the *Preferred Service Provider* portion of the FITCI website. FITCI associated and graduate companies will have access to your information and special rates. You may opt to have your logo and weblink displayed on the site. Most providers find this a valuable marketing opportunity.
- Every six months, your company's primary contact will receive an email confirmation an invitation to update the company's listing in the *Preferred Service Provider*, if necessary.

All questions regarding your listing in the *Preferred Service Provider* can be addressed to the FITCI Office Manager at [Info@fitci.org](mailto:Info@fitci.org).

Frederick Innovative Technology Center, Inc. (FITCI)  
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