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| --- | --- |
| **UB CAT Project Title:** |  |
| **UB Principal Investigator:** | [Name]  [Title]  [Department]  [Phone]  [Email] |
| **Private Sector Company Sponsor (“Sponsor”)**  **Full Legal Name:** | [Company Name]  [Company Contact]  [Title]  [Phone]  [Email] |
| **Approximate Anticipated Budget** | **$** |
| **Project Summary and how it addresses the big data and health sciences focus area (100 words):** |  |
| **Timeframe for completing project milestones:** |  |

Please contact the UB CAT administrator: [ubcatprogram@buffalo.edu](mailto:ubcatprogram@buffalo.edu) with any questions.

**Please email the completed form to:** [**ubcatprogram@buffalo.edu**](mailto:ubcatprogram@buffalo.edu)

**If this project is selected you will be invited to submit a full application.**