INNOVATION ACCELERATION FUND
PROPOSAL APPLICATION FY26
supported under Regents Innovation Fund

Process:

1. Contact the Office of Innovation Commercialization, licensing@iastate.edu , or (515) 294-4740 to discuss your idea prior to submitting.
2. Complete the application, using the form **and format** below, and submit to licensing@iastate.edu
3. Selected applicants will be invited to make a 15-minute presentation to an evaluation panel regarding the request, followed by discussion. Applicants not selected for a presentation will be provided feedback which may include an invitation to resubmit in the future.
4. Applicants will be notified within one calendar week of the funding decision.

Award Information:

1. Up to $50,000 is available per award under the **Innovation Acceleration Fund** program. A 1:1 match of internal or external funding is required.
2. Terms and conditions of the award will be in the award notification. Projects must be completed by the end of the fiscal year of the award (end of June annually).
3. Non-technical reports that do not contain proprietary information are required at the end of the grant program.

Proposal Title:

Project Team (including company partners, if applicable)**:**

Intellectual Property (including ISURF disclosure number, if applicable)

Previous Funding Sources (federal, industry, internal, other)

Lead Department / Institute / Center / Extension Unit that will manage the account

Lead Unit (RRC):

Budget:

CATEGORY	AMT REQUESTED[1]	ISU MATCH	COMPANY MATCH – IN KIND	COMPANY MATCH - CASH
Salaries				
Benefits				
Graduate student stipends				
Benefits				
Tuition				
Undergraduates				
Equipment				
Lab Supplies				
Field Supplies				
Other Supplies & Services				
Travel				
Publication				
Miscellaneous				

TOTAL				

[1]*Amt requested refers to the amount of IAF funding requested; do not include matching contributions in this column.*

PROJECT DESCRIPTION

(Please address each section. Not to exceed two pages in total.)

INTRODUCTION: (Describe the background information and context of the proposed project)

PROBLEM STATEMENT: (What is the problem that will be solved?)

SOLUTION STATEMENT: (What is the proposed project solution to the problem?)

POTENTIAL IMPACT: (Describe the product concept, market/customer segment and potential impact, such as generation of new intellectual property, development of new products or services, formation of new company, etc.)

COMMERCIALIZATION: (Describe how the proposed research will improve the commercialization potential of the technology and/or facilitate a partnership with an Iowa-based company that leads to new innovations.)

VALIDATION OF TECHNOLOGY: (What steps have you taken to validate your technology? SBIR/STTR funding, State of Iowa funding, CyBIZ Lab project validation, I-Corps validation, purchase orders, or other steps that confirm progress and define the opportunity?)

HAS YOUR TECHNOLOGY BEEN DISCLOSED TO THE OFFICE OF INNOVATION COMMERCIALIZATION?

[ ] Yes [ ] No If yes, what date? ____________________

MILESTONES & TIMEFRAME: (Project and business milestones, including project and business goals and deliverables.)

HAVE YOU RECEIVED RIF/IAF FUNDING IN THE PAST? [ ] Yes [ ] No If yes, what year(s):

If yes, please confirm timely expenditures of awarded funds. [ ] Confirmed [ ] NCE processed [ ] Not spent (why not)

If yes, please confirm that matching funds from your industry partner were committed and processed.

[ ] Confirmed [ ] Not confirmed (please explain what changed)