



## APPLICATION TO JOIN LAB LAUNCH

Fill out as much information as possible and return to [team@lablaunch.org](mailto:team@lablaunch.org).

1. **Primary contact information**
  - a. **Name (first, last):**
  - b. **Title/position:**
  - c. **Company Name:**
  - b. **Website:**
  - c. **Email:**
  - d. **Phone:**
  - e. **Type of business:**       Corporation     LLC     Sole Proprietor     Individual
  - f. **Employer Identification Number:** \_\_\_\_\_  
Leave blank for individual applicants
  
2. **To which Lab Launch location are you applying?**     Monrovia, CA     Chatsworth, CA
  
3. **How many full-time employees will be with your company in the first 1-6 months at Lab Launch?**
  
3. **Briefly describe what you would like to do at Lab Launch, including the general type of science and major hazards that might entail:**  
(Example: We will purify recombinant proteins from E. coli and use flammable chemicals.)
  
4. **Will you require any of the following add-on or premium services:** (check all that apply)  
 Cell / Tissue Culture (BSL-2)     Liquid Nitrogen storage     Private lab space  
 Space for large or floor-standing equipment (too large for a 9' x 2' benchtop)
  
5. **Will you have any part-time employees, volunteers, or independent contractors in the first 1-6 months at Lab Launch? If yes, how many?**
  
6. **How did you hear about Lab Launch?**     mailing list/newsletter     current resident     internet search  
 Google ad     trade association     networking event     technology transfer office  
 other