



**THE RHODE ISLAND LIFE SCIENCE HUB**  
**PROGRAMMING GRANT APPLICATION TO PILOT PROGRAMS FOR**  
**UNDER-REPRESENTED POPULATIONS**

**APPENDIX A**

**PLEASE SUBMIT A COMPLETE ELECTRONIC APPLICATION WITH ATTACHMENTS TO THE  
RHODE ISLAND LIFE SCIENCE HUB AT [INFO@RILIFESCIENCE.COM](mailto:INFO@RILIFESCIENCE.COM).**

- This supplemental application consists of a set of required attachments and a certification form. To be considered for Business Attraction Grant Program funds, all items must be submitted in a single submission, organized as instructed below. Failure to provide required information could result in a delay in the review of or rejection of an application.
- The Rhode Island Life Science Hub reserves the right to require the submission of additional information in connection with any application or to require the revision of an application.
- Applicants approved for financing will be required to enter into a grant agreement with the Rhode Island Life Science Hub to receive funding. The Rhode Island Life Science Hub may request additional information in the course of negotiating that agreement.
- All applicants are advised that any and all records (documents, correspondence, memoranda, etc.), received or maintained by the Rhode Island Life Science Hub may be a matter of public record and subject to release upon a request from a member of the public under the Rhode Island Access to Public Records Act (“APRA”), R.I. Gen. Laws Section 38-2-1 *et seq.* In response to a request, the Rhode Island Life Science Hub has the right, in its sole discretion, to redact or withhold information which is exempt from disclosure under APRA, including trade secrets and commercial or financial information which is of a privileged or confidential nature. The Rhode Island Life Science Hub recommends that any portion of any attachment in the application that contains such information be clearly labeled with the legend “Confidential Information.”



**RILSH APPLICATION FOR PROGRAMMING GRANT TO PILOT PROGRAMS FOR  
UNDER-REPRESENTED POPULATIONS**

Organization Name:

Address:

Organization Description:

Organization Website:

Organization Primary Contact:

Contact Email:

Contact Phone Number:

Corporate Status (e.g. Articles of Incorporation, Registration with RI Secretary of State, etc.):

Specific Details on Planned Pilot Programs for Under-represented Populations:



Provide Details on Under-represented Population (include numbers of academic colleagues, entrepreneurs, early-stage companies and established businesses supported):

Provide Details on Any Academic and/or Industry Partners You Anticipate Working with and Describe Their Specific Roles:

Provide Details on Organizations Ability to Deliver Programs to Meet the RI Ecosystem Needs:



Provide a Detailed Budget for Planned Use of Funds (\$50,000/year for two years):



Provide Impact/Key Milestones/Metrics for Organizations Programming in Rhode Island:

If Successful, Describe the Specific Outcomes for RI Life Sciences:

Provide a Timeline for Execution of Key Milestones:

**Please Provide Reference Letters from One (1)-Two (2) Rhode Island Life Science Companies Who Have Been Supported by Organizations Existing Programs.**



### **Indictment**

Within the past five years, has the applicant or any of its officers, directors, employees, agents, or subcontractors of which the applicant has knowledge, been the subject of an indictment, judgement, conviction, or grant of immunity, including pending actions, for any business-related conduct constituting a crime under state or federal law? **(Yes/No)**

### **Government Suspension**

Within the past five years, has the applicant or any of its officers, directors, employees, agents, or subcontractors of which the applicant has knowledge, been the subject of a government suspension or debarment, rejection of any bid or disapproval of any proposed contract, including pending actions, for lack of responsibility denial or revocation of prequalification or voluntary exclusion agreement? **(Yes/No)**

### **Violation of Law**

Within the past five years, has the applicant or any of its officers, directors, employees, agents, or subcontractors of which the applicant has knowledge, been the subject of any governmental determination of a violation of any public works law or regulation, or labor law or regulation or any OSHA violation deemed “serious or willful?” **(Yes/No)**

### **Proprietary**

Please indicate whether your responses to this application are proprietary in nature as applicable to the MA Public Records Law. **(Yes/No)**



## Application Certification Form

The undersigned is the chief executive officer or equivalent officer of the applicant with the authority to bind the company for the proposed RILSH Business Attraction Grant Program.

I certify that:

- I have reviewed the information contained in this supplemental Business Attraction Grant Program application and confirm that the statements made in this supplemental application in its entirety including all attachments, appendices, etc. are true, accurate and complete to the best of my knowledge.
- The applicant is neither a person subject to the Rhode Island Code of Ethics nor a person within the scope of R.I.G.L. § 36-14-5(h).
- The applicant has not been convicted of bribery or attempting to bribe a public official or employee of the Rhode Island Life Science Hub or of the State, has not been disqualified from an awarded contract with Rhode Island Life Science Hub or the State, and has never defaulted on work awarded by the Rhode Island Life Science Hub or the State.

Name of Certifying Officer:

Title:

Signature of Certifying Officer:

Date Signed:

**If you have any questions regarding the application process, e-mail [info@rilifescience.com](mailto:info@rilifescience.com).**