



Idea Challenge Application

1. Project Name:

2. Team Members:

Name	Student E-mail Address	Personal E-mail Address	Phone Number	Current Year in School	Major	Primary Contact

3. Advisor(s)/Mentor(s): (Optional)

Name	E-mail Address	Affiliation

4. Questions:

a. Describe your idea/project.

b. What type of issue/problem does your idea/project address?

c. What is unique about the way your idea/project addresses this problem?

d. Who will benefit from your idea/project?

e. Where are you in the design or development of this idea/project?

f. Will you work on pursuing your idea/project after you graduate? Yes No Maybe (Check boxes then pop up below questions depending what they answer on the check box)

i. If yes, how can/will your idea/project be sustained beyond the completion of your graduation?

ii. If no, why will you be unable to work on or pursue this idea/project after you graduate?

iii. If maybe, how might your idea/project be sustained after you graduate?

g. Why is this idea/project important to you?