



Venture Challenge™

2010 SEMI FINALIST INFORMATION SHEET

University: _____

Advisor Name: _____ Email: _____

Address: _____

Team Leader Name: _____ Email: _____

Address: _____

Team Member Name: _____ Email: _____

Team Member Name: _____ Email: _____

Team Member Name: _____ Email: _____

Team Member Name: _____ Email: _____

Name of Business: _____

Description of Business (50 words or less): _____

*Please submit this form by Friday, February 19th to the EMC.
You may include this document with your business plans and contract or fax/email it.*

Attn: Venture Challenge

The Entrepreneurial Management Center
San Diego State University
5250 Campanile DR – GW1502
San Diego, CA 92182-1915
Email: jamaraneni@emc.sdsu.edu
Fax: (619)594-8879