## **Launchpad Leadership Academy- Industry Partnership Agreement**

**Purpose:** This form collects the information needed to scope a partnership between the Launchpad Leadership Academy and your organization ("Company"). Please complete all applicable sections. Items marked with \* are required.

1) Company Information  • Legal Company Name:*			
DBA (if any):   Website:   Headquarters Address:   City/State/ZIP/Country:   Number of Employees:   1-10   11-50   51-200   201-1000   1000+   Industry/Sector:   Brief Company Description (1-3 sentences):   Primary Contact   Name:   Title: *   Phone:   Secondary Contact (optional)   Optional   Phone:   Secondary Contact (optional)   Phone:   Phone:   Secondary Contact (optional)   Optional   Optional	1) Co	mpany Information	
DBA (if any):   Website:   Headquarters Address:   City/State/ZIP/Country:   Number of Employees:   1-10   11-50   51-200   201-1000   1000+   Industry/Sector:   Brief Company Description (1-3 sentences):   Primary Contact   Name:   Title: *   Phone:   Secondary Contact (optional)   Optional   Phone:   Secondary Contact (optional)   Phone:   Phone:   Secondary Contact (optional)   Optional   Optional		Legal Company Name:*	
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Brief Company Description (1–3 sentences):    Primary Contact	•		
<ul> <li>Name:* <ul> <li>Title:*</li> <li>Email:*</li> <li>Phone:</li> </ul> </li> <li>Secondary Contact (optional)  <ul> <li>Name: <ul> <li>Title: <ul> <li>Email: <ul> <li>Phone:</li> </ul> </li> </ul> </li> <li>2) Partnership Overview  <ul> <li>Primary Objectives (select all that apply): <ul> <li>Student engagement (projects, internships, co-ops)</li> <li>Talent pipeline / recruiting events</li> <li>Research collaboration / sponsored projects</li> <li>Curriculum input / guest lectures / advisory boards</li> <li>Access to facilities/equipment</li> <li>Community events / conferences / hackathons</li> </ul> </li> </ul></li></ul></li></ul></li></ul>	•	Brief Company Description (1–3 sentences):	
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Secondary Contact (optional)  Name:	•	Email:*	
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○ □ Community events / conferences / hackathons	•	Primary Objectives (select all that apply):      ○ □ Student engagement (projects, internships, co-ops)     ○ □ Talent pipeline / recruiting events     ○ □ Research collaboration / sponsored projects     ○ □ Curriculum input / guest lectures / advisory boards	
·			
○ □ Other:			

osed	Industry Contributions for the partnership (select all that apply)			
cial Support				
□ Un	restricted donation to support scholarships/events			
0	**			
□ Res	stricted gift (specify purpose):			
0				
□ In-	kind equipment donation			
0				
0	<b>Approx. value:</b> \$ □ New □ Used (condition:)			
0	Installation/maintenance provided by Company: $\square$ Yes $\square$ No			
0				
Short	narrative or list of proposed contribution (3–6 sentences):			
& Re	esources			
□ Ac	cess to Company space/lab			
	cess to Company space/lab  Location(s):			
	cess to Company space/lab  Location(s):  Capacity & hours:			
	cess to Company space/lab  Location(s):  Capacity & hours:  Safety/clearance requirements:			
	cess to Company space/lab  Location(s): Capacity & hours: Safety/clearance requirements: cess to Company equipment			
	cess to Company space/lab  Location(s):  Capacity & hours:  Safety/clearance requirements:			
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	cess to Company space/lab  Location(s): Capacity & hours: Safety/clearance requirements:  cess to Company equipment  Location(s): Capacity & hours: Safety/clearance requirements:  Safety/clearance requirements:  Safety/clearance requirements:  Areas (e.g., AI/ML, UX, product, compliance):  Estimated hours per month:			
	cess to Company space/lab  Location(s):			
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<ul> <li>Student teams for projects/capstones <ul> <li>Disciplines/skills sought:</li> <li>Timeline:</li> </ul> </li> <li>Recruiting &amp; branding opportunities (career fairs, panels)</li> <li>□ Facilitation of internships / co-ops</li> <li>□ Faculty expertise/consulting</li> <li>□ Event collaboration / venue support</li> <li>□ Other:</li> </ul>
Engagement type: □ Paid internship □ For-credit practicum □ Capstone □ Volunteer     Number of students: □ Duration: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
<ul> <li>6) Timeline &amp; Milestones</li> <li>Desired start date:/</li></ul>
<ul> <li>7) Evaluation &amp; Reporting</li> <li>Quarterly check-ins: □ Accept □ Prefer monthly □ Other:</li> <li>Metrics you can report (choose any): □ Student hires □ Internship hours □ Events hosted □ Donations/in-kind value □ Product/prototype progress □ Community impact notes</li> </ul>

4) Requested Commitment from Launchpad Leadership Academy (select all that apply)

ompany Representative				
•	Name:	Title:		
•	Signature:	_ Date: / /		
	chpad Leadership Representative (agreemen	• '		
•	Name:	Title:		
	Signature:	Date: / /		

8) Signatures (non-binding agreement; final terms via agreement)

Thank you for your interest in partnering with the Launchpad Leadership Academy.