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| **Application Form for EIB Group Expertise Network** |
| **CONTACT INFORMATION** |
| Venture Name |  |
| Surname |  |
| Name |  |
| Contact email |  |
| Contact phone number |  |
| Contact Skype username |  |
| Website of venture |  |
| Venture address |  |
| **BUSINESS NEEDS** |
| Describe the solution of your venture (150 words max) |  |
| Describe the problem you are currently facing with your venture (250 words max) |  |
| Describe the assistance that you are seeking (e.g. scaling advice in specific area, legal, HR, raising investments) (100 words max) |  |
| Please have a look at our experts and tell us who you would like to get in touch with (please note that this does not guarantee that you will be assigned to this expert, as they have limited times allocated to this service): <https://institute.eib.org/sit-alumni/resources/eib-volunteers/>  |  |
| Anything else you would like to share at this stage? |  |