**Protégé Application Template**

Date of Submission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Overview**

The Protégé application must be filled out in its entirety and submitted concurrently with the agreement package. This form should not be submitted without an accompanying a Mentor-Protégé Agreement (MPA). Any forms submitted to NASA before a signed or approved agreement will not be kept on file and will have to be resubmitted. NASA may request additional information as necessary.

P1. Protégé Information

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| **Protege Information** |
| NAME OF PROTÉGÉ |  |
| UNIQUE ENTITY IDENTIFIER (UEI) |  |
| POINT OF CONTACT NAME |  |
| POSITION TITLE |  |
| ADDRESS |  |
| PHONE |  |
| E-MAIL |  |
| WEBSITE/SOCIAL MEDIA |  |
| INDUSTRY (I.E., R&D, Aerospace manufacturing of ground support equipment and flight systems, and highly technical software and cutting-edge technologies corresponding to eligible NAICS codes identified in the MPP Guidebook) |  |
| CAGE CODE |  |
| YEAR ESTABLISHED |  |

**P2. Eligibility.** Indicate that the entity is currently eligible to participate as a Protégé in accordance with the eligibility definitions outlined in the NASA FAR Supplement 1819.72.

**Enter dates for all applicable Socio-Economic Certification and/or Expirations:**

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| --- |
| **Small Business Socio-Economic Certification and/or Expirations** |
|  | ENTRANCE DATE | EXPIRATION DATE |
| Small Disadvantaged Business |  |  |
| 8(A) |  |  |
| Small Business Innovation Research (SBIR) PHASE II AWARD |  |  |
| HUBZone AWARD |  |  |
|  | DATE | CERTIFIED DATE |
| Veteran Owned Small Business (VOSB) |  |  |
| Service-Disabled Veteran Owned Small Business (SDVOSB) |  |  |
| Woman Owned Small Business (WOSB) |  |  |
| Economically Disadvantaged Woman Owned Small Business (EDWOSB) |  |  |
| Historically Black Colleges and Universities (HBCU) / Minority Serving Institutions (MSI) |  |  |
| AbilityOne |  |  |

**P3. North American Industry Classification System (NAICS) Codes.** The NAICS codes represent the contemplated supplies or services to be provided by the Protégé to the Mentor. At the time the agreement is submitted to NASA Mentor-Protégé Program (MPP) Program Manager (PM) for approval, the Protégé cannot exceed the size standard for the applicable primary NAICS codes.

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| --- |
| **NAICS Codes** |
|  | CODE | TITLE/DESCRIPTION |
| PRIMARY NAICS |  |  |
|  |  |
| ADDITIONAL NAICS  |  |  |
|  |  |
|  |  |
|  |  |

**P4.** **Historical Background.** In 400 words or less, please provide a narrative summary of the Protégé, including a profile with historical activities and accomplishments. Include an explanation of the Protégé’s ability to participate in the NASA MPP without impacting its day-to-day operations (e.g., business management, revenue stream, etc.). Also, include a history of participation in the NASA SBIR Program, if applicable.

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| **Protégé Historical Background** |
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**P5. Protégé Performance Data.** Please fill out the following tables with all relevant requested data for two complete Government Fiscal Years (GFYs) immediately preceding submission of this application. Please note that the GFY is from October 1 to September 30.

**a. Protégé Employees, and Gross Revenue.** Provide the number of employees and gross revenue earned at the end of each GFY noted below. If none, enter zero.

|  |
| --- |
| **Protégé Employees and Annual Gross Revenue** |
|  | Number of Employees | Gross Revenue |
| GFY-20\_\_ |  | $ |
| GFY-20\_\_ |  | $ |

**b. Protégé Proposal Submissions.** Provide the number of proposals submitted to NASA and other Federal Agencies in the associated GFYs below. If none, enter zero.

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| --- |
| **Protégé Proposal Submissions** |
|  | NUMBER OF NASA PROPOSAL SUBMISSIONS  | NUMBER OF FEDERAL AGENCIES PROPOSAL SUBMISSIONS (EXCLUDING NASA)  |
| GFY-20\_\_ |  | $ |
| GFY-20\_\_ |  | $ |

**c. Prime Contracts.** List the number of prime contracts awarded from NASA and other Federal Agencies along with the associated award dollar values for all prime contracts received by the Mentor. If none, enter zero.

|  |
| --- |
| **Prime Contracts Awarded to Protege** |
|  | GOVERNMENT FISCAL YEAR | NUMBER OF PRIME CONTRACTS AWARDED | TOTAL PRIME CONTRACTS AWARD VALUE |
| NASA PRIME CONTRACTS | GFY- |  | $ |
| GFY- |  | $ |
| OTHER FEDERAL AGENCY PRIME CONTRACTS  | GFY- |  | $ |
| GFY- |  | $ |

**d. Subcontracts.** List the number of subcontracts awarded from NASA and other Federal Agencies along with the associated award dollar values for all subcontracts. If none, enter zero.

|  |
| --- |
| **Subcontracts Awarded to Protege** |
|  | GOVERNMENT FISCAL YEAR | NUMBER OF SUBCONTRACTS AWARDED | TOTAL SUBCONTRACTS AWARD VALUE |
| NASA SUBCONTRACTS | GFY \_\_\_\_\_\_ |  | $ |
| GFY \_\_\_\_\_\_ |  | $ |
| OTHER FEDERAL AGENCY SUBCONTRACTS  | GFY \_\_\_\_\_\_ |  | $ |
| GFY \_\_\_\_\_\_ |  | $ |

If any subcontracts were awarded during a Mentor-Protégé relationship, regardless of the agency, please provide a brief narrative (i.e., Awarding Agency and Organization, GFY, Number of Subcontracts, and Contract Value) in the “Comments” text box below.

|  |
| --- |
| **Comments** |
|  |

**e. Protégé-Awarded Subcontracts.** If the Protégé has had the opportunity to award subcontracts to Mentors, please list the number and total award dollar value in the table below. If none, enter zero.

|  |
| --- |
| **Protégé-Awarded Subcontracts** |
|  | GOVERNMENT FISCAL YEAR | NUMBER OF SUBCONTRACTS AWARDED | TOTAL SUBCONTRACTS AWARD VALUE |
| NASA SUBCONTRACTS AWARDED BY PROTÉGÉ | GFY \_\_\_\_\_\_ |  | $ |
| GFY \_\_\_\_\_\_ |  | $ |
| OTHER FEDERAL AGENCY SUBCONTRACTS AWARDED BY PROTÉGÉ | GFY \_\_\_\_\_\_ |  | $ |
| GFY \_\_\_\_\_\_ |  | $ |

**P6. Signatures.** Before signing this document, please verify that the content you are submitting is correct.

Protégé Signature: Date:

Protégé Title: