

OFC VENTURE CHALLENGE COMPANY INFORMATION FORM

Company Name: _____

School Name: _____

Team Advisor: _____

Team Members: 1. _____

2. _____

3. _____

4. _____

5. _____

Company Description: _____

Team Leader Name: _____

Team Leader E-Mail Address: _____

Team Leader Phone: _____

Please FAX at 770-984-2966 or e-mail this form to Dr. Mohammad Bhuiyan By
March 15th of the competition year.