

# 2016 Emerging Technology Vendors Application

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1. Is the company seeking inclusion in the Emerging Technology Vendors list actively working with channel partners such as solution providers, integrators, managed service providers, VARs, etc. in North America? \*

☐ Yes

☐ No

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2. The person filling out this form will be CRN's primary contact should any questions arise.

Please enter your contact information below.

Your First Name \*

Last Name \*

Your Title \*

Your Organization \*

Do you work for the vendor or a PR company? \*

Vendor

PR Company

Email Address \*

Phone Number \*

Extension, if applicable

Name of company that you will be applying for \*

3. Who is the main marketing/PR contact (for award/notification purposes)? \*

- ☐ I am (the person filling out this form)
- ☐ I would like to provide additional contact information for this person

4. Main Marketing/PR Contact (for award/notification purposes)

Full Name \*

Title \*

Company \*

Email Address (not for publication) \*

Twitter Handle

Phone Number (not for publication) \*

Extension, if applicable

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5. For the rest of this application, all questions apply to the company seeking inclusion in CRN's 2016 Emerging Technology Vendors list.

If you work externally, please answer for your client rather than your own company.

Name of the company applying for CRN's  
2016 Emerging Technology Vendors list \*

Headquarters Street Address \*

Line 2

Line 3

City \*

State/Province/District or Protectorate \*

Alabama

Alaska

Alberta

American Samoa

Arizona

Arkansas

British Columbia

California

Colorado

Connecticut

Delaware

Florida

Georgia

Guam

Hawaii

Idaho

Illinois

Indiana

Iowa

Kansas

Kentucky

Louisiana

Maine

Manatoba

Marshall Islands

Maryland

Massachusetts

Michigan

Postal Code \*

	Micronesia	
	Minnesota	
	Mississippi	
	Missouri	
	Montana	
	Nebraska	
	Nevada	
	New Brunswick	
	Newfoundland and Labrador	
	New Hampshire	
	New Jersey	
	New Mexico	
	New York	
	North Carolina	
	North Dakota	
	Northern Marianas	
	Northwest Territories	
	Nova Scotia	
	Nunavut	
	Ohio	
	Oklahoma	
	Ontario	
	Oregon	
	Palau	
	Pennsylvania	
	Prince Edward Island	
	Puerto Rico	
	Quebec	
	Rhode Island	
	Saskatchewan	
	South Carolina	
	South Dakota	
	Tennessee	
	Texas	
	Utah	
	Vermont	
	Virginia	
	Virgin Island	
	Washington	
	West Virginia	
	Wisconsin	
	Wyoming	
	Yukon	
	Other	

Country \*

Headquarters Phone Number \*

Corporate Twitter Handle

Main Website URL \*

Year the company was founded (2010 or later to be eligible) \*

Please provide a brief overview of the company's technology and market focus. (Max. 50 words) \*

What is the company's **PRIMARY** technology sector? \*

Big Data/Business Intelligence

Business Applications

Cloud

Data Center

Internet of Things

Managed Services

Mobility

Networking & VoIP

Security

Storage

Virtualization

Other (please specify to right)

If "Other" please specify

What is the company's **SECONDARY** technology sector?

Big Data/Business Intelligence

Business Applications

Cloud

Data Center

Internet of Things

Managed Services

Mobility

Networking & VoIP

Security

Storage

Virtualization

Other (please specify to right)

If "Other" please specify.

## 6. Lead Executive Information

Lead Executive Full Name \*

Lead Executive Title \*

Lead Executive Email Address \*

Lead Executive Twitter Handle

Lead Executive Phone Number \*

Lead Executive Extension, if applicable

Years in Position: \*

## 7. Lead Executive Photo

Please upload a photo of the lead executive's face below (max file size 10mb).

The photo must be high resolution, 300dpi JPG or TIFF. This image will be used online and in print. Editorial deadlines prevent us from requesting an alternative photo from you, in the event that the one you are about to upload is not suitable.

Once you select your photo, you must click the "upload button" in order for your photo to upload successfully. \*

Browse...

Upload

8. If one section for strategic leader is not sufficient, such as in the case of a Co-CEO, please select "Add a second Executive" below. If one section is sufficient, please select "Continue with application" below. \*

- ☐ Add a second executive
- ☐ Continue with application

## 9. Co-Leader Contact Info

Co-Leader Full Name \*

Co-Leader Title \*

Co-Leader Email Address \*

Co-Leader Twitter Handle

Co-Leader Phone Number \*

Co-Leader Extension, if applicable

Years in Position: \*

## 10. Co-Leader Photo

Please upload a photo of the co-leader's face below (max file size 10mb).

The photo must be high resolution, 300dpi JPG or TIFF. This image will be used online and in print. Editorial deadlines prevent us from requesting an alternative photo from you, in the event that the one you are about to upload is not suitable.

Once you select your photo, you must click the "upload button" in order for your photo to upload successfully.

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Upload

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## 11. Top Channel Executive Information

Top Channel Executive Full Name \*

Top Channel Executive Title \*

Top Channel Executive Email Address \*

Top Channel Executive Twitter Handle

Top Channel Executive Phone Number \*

Top Channel Executive Extension, if applicable

Years in Position: \*

## 12. Top Channel Executive Photo

Please upload a photo of the co-leader's face below (max file size 10mb).

The photo must be high resolution, 300dpi JPG or TIFF. This image will be used online and in print. Editorial deadlines prevent us from requesting an alternative photo from you, in the event that the one you are about to upload is not suitable.

Once you select your photo, you must click the "upload button" in order for your photo to upload successfully. \*

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Upload

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### 13. Marketing Director Information

Marketing Director Full Name \*

Marketing Director Title \*

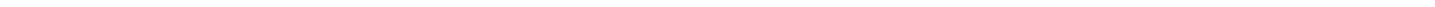
Marketing Director Email Address \*

Marketing Director Twitter Handle

Marketing Director Phone Number \*

Marketing Director Extension, if applicable

Years in Position: \*



**14. Partner Reference:** In this section, please enter a reference comment from and contact information for one of your U.S. reseller partners.

Partner's Company \*

Partner's Full Name \*

Partner's Title \*

Partner's Email Address \*

Partner's Phone Number \*

Partner's Extension, if applicable

**15. Reference Comment from Partner** *(Max. 50 words)* \*

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**16. How many solution provider partners do you have in the U.S.?** \*

17. Does the company sell through a 100 percent channel model? \*

- ☐ Yes
- ☐ No

18. How many solution provider partners do you have worldwide (including the U.S.)? \*

19. What is the goal number of new partners to recruit in the next 12 months? \*

- ☐ 50 partners or less
- ☐ 51 partners to 250 partners
- ☐ 251 partners to 500 partners
- ☐ More than 500 partners

20. What is the geographic reach of your partner recruitment efforts? \*

- ☐ Limited US regional recruitment
- ☐ Broad national US recruitment
- ☐ Limited international recruitment
- ☐ Broad international recruitment

21. What is your ideal partner? \*

- ☐ Business process consultant
- ☐ Midmarket focused solution provider
- ☐ Small business focused solution provider
- ☐ Volume orientated reseller partner
- ☐ Managed service provider
- ☐ Enterprise focused solution provider
- ☐ Other (please specify)

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22. Please provide a brief description of your **mainstay product**, including name, key features and target market. *(Max. 50 words)* \*

23.

In order to complete and submit your application, please upload a high-resolution photo of your **mainstay product**. Once you select your photo, you must click the "upload button" in order for your photo to upload successfully.

\*

Browse...

Upload