

**NAME OF TEAM you are giving feedback to:** Optimal Surgical

**Audience Feedback Form - ELEVATOR PITCH COMPETITION**

Note: Fill these out during each Q&A session with the judges. This form will **not** be used to determine the winners of the competition. Fill this out to provide feedback to the competitors. We will give this to them to help them improve.

What are the **strongest or most distinctive aspects** of this business concept?

Strong technical background.

What **areas need the most improvement** or additional development?

Comment on the **presentation quality** of the pitch, i.e. body language, clarity of thought, etc.

Great!

Additional **feedback or suggestions**?

**Overall score (circle one):** Consider that the goal of the pitch is to get you to accept a second meeting to discuss the possibility of an investment. Rate the likelihood you would invite them back for a second meeting.

1	2	3	4	5	6	7	8	9	10
Low chance of a second meeting					High chance of a second meeting				

Leave at your seat at the end of the night, we'll collect and sort these.

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What are the **strongest or most distinctive aspects** of this business concept?

- 100% decrease ~~in~~ incidence of ~~the~~ incidence of malocclusion in lateral surgery

What **areas need the most improvement** or additional development?

- not differentiable this product  
- market minimized if could convert ~~the~~ current orthodontics

Comment on the **presentation quality** of the pitch, i.e. body language, clarity of thought, etc.

- not present - could use hand's more

Additional **feedback or suggestions?**

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