

Dr. Mahalingam College of Engineering and Technology- Pollachi-03.
(An Autonomous Institution)
Office of Dean Research and Innovation

IPR Incentive – Claim Form and Checklist

(Please use only ONE form per patent grant even if inventors are from different departments)

IPR
FORM 6

a) Patent details:

Claim for the Academic year	JUNE _____ to MAY _____
Title of the Patent:	
Journal No.:	
Name of Patent office:	
Application No.:	
Date of Filing:	
Date of Publication:	
Date of Granting & Patent Number	

b) Details of MCET Inventors:

S.No.	Name of Inventors		Designation & Department
1.	1 st Inventor		
2.	2 nd Inventor		
3.	3 rd Inventor		
4.	4 th Inventor		
5.	5 th Inventor		

Check-List

(Please provide Hard and Soft Copy of below mentioned details)

Complete Patent

Proof for Patent Grant

I/ we assured you that above mentioned details are correct. I/we declare that the incentive for above mentioned patent was not claimed previously and it will not be claimed in MCET in future.

S.No.	Name of Inventors		Designation & Department	Claim Amount	Signature with Date	Recommendations of HoD
1.	1 st Inventor					Verified/Not Verified _____ (Signature of HoD)
2.	2 nd Inventor					Verified/Not Verified _____ (Signature of HoD)
3.	3 rd Inventor					Verified/Not Verified _____ (Signature of HoD)
4.	4 th Inventor					Verified/Not Verified _____ (Signature of HoD)
5.	5 th Inventor					Verified/Not Verified _____ (Signature of HoD)

Date:

Place:

For office Use Only

The details are verified and incentive of Rs. _____ has been recommended.

S.No	Name of the Inventor		Designation & Department	Amount Claimed	Amount Sanctioned
1.	1 st Inventor				
2.	2 nd Inventor				
3.	3 rd Inventor				
4.	4 th Inventor				
5.	5 th Inventor				
Total Grant					

Signature of the Publication & IPR Coordinator

Signature of the Dean R & I

Signature of the Principal

INCENTIVE NORMS FOR PATENT GRANT

Granted patent	Rs.7000
Design IPR, Trade Mark, Copy Rights	-