

Guru Gobind Singh Indraprastha University

("A State University established by the Govt. of NCT of Delhi") Sector-16C, Dwarka, New Delhi – 110 078

IPU-IPR CELL

Email: ipu-ipr@ipu.ac.in

GGSIPU/IPU-IPR/LF/2024-25/<u>02</u>

Date: 10.07.2024

NOTICE

Sub: Invitation for applications for financial assistance to file various IPRs

It is hereby informed that the competent authority of Guru Gobind Singh Indraprastha University has selected Effectual Services (Registered Office: Plot No. 94, 3rd floor, Pocket-10, Sector 13, Dwarka, New Delhi- 110078) for IPR filing and processing related matters up to 31st March, 2025.

The interested faculty, scholars and students of USSs are hereby informed to submit applications on prescribed format on or before 14th August 2024 for financial assistance to file various IPRs, if any, for the purpose of further scrutiny, evaluation and recommendation for financial assistance and technical

Those who have already submitted their applications need not resubmit unless they wish to amend or revise their applications.

The duly filled in applications in the attached Performa and duly forwarded by respective Deans be sent to: The Chairperson, IPU-IPR Cell (Block C). Email for communication: ipu-ipr@ipu.ac.in

> (Prof. (Dr.) Lisa P. Lukose) Chairperson, IPU-IPR Cell

Copy to:

- 1. Dean, USICT/USBT/USEM/USCT/USBAS/USLLS/USE/USMS/USMC/USAR/USDI/USAP/USLA
- 2. Director (R&D cell)/(R&I)/CEPS/East Campus/Development/Academic Affair/IIQAC/CCGPC/ 3. Chief Mentor, AICTE IDEA Lab
- 4. AR to Vice Chancellor Office
- 5. AR to Registrar Office
- 6. Controller of Finance, GGSIPU
- 7. Head, UITS with a request to upload on university website

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PERFORMA FOR FINANCIAL ASSISTANCE TO FILE VARIOUS INTELLECTUAL PROPERTIES

1.	Name of the inventor/ creator	:
2.	Type of IPR protection sought (spec	ify whether Patent, Industrial design, plat Varity etc:
3.	Faculty/Research scholar/student	:
4.	Designation	:
5.	Name of School	:
6.	Broad area of invention/creativity	:
7.	Keyword	:
Q	Email ID Cu	

- 8. Email ID of the inventor/Creator:
- 9. Mobile No. of the applicant
- 10. Is it collaborated work, if yes write name of organization:
- 11. Name & designation of co-inventors if any:

Attach your proposed document.