**3RD IP EXCELLENCE AWARDS 2023**

**NOMINATION FORM**

1. **GENERAL INFORMATION**

|  |  |
| --- | --- |
| Applicants Name |  |
| Organization Name |  |
| Applicants Email |  |
| Applicants Mobile & Landline number |  |
| Link to website |  |
| Signature |  |

1. **WHICH CATEGORY DOES YOUR ORGANIZATION FALL UNDER:**

🞎 Large Enterprise

🞎 MSMEs

🞎 IP Firm

🞎 R&D Institute

🞎 Academic Institute

🞎 Start-up

🞎 IP Service Providers

**COMPANIES/FIRMS REGISTERED UNDER ANY OF THE FOLLOWING LAWS IN INDIA** 🞎 Partnership Act 🞎 LLP

🞎 LLP 🞎 MSME Act

🞎 Companies Act 🞎 Other

1. **YEAR OF ESTABLISHMENT: …………**
2. **SPECIFY YOUR SECTOR**

🞎 Engineering/ Manufacturing Sector 🞎 ICT & Services

🞎 Life Sciences 🞎 Other

**SECTION - A**

|  |
| --- |
| **GIVE DETAILS OF THE NUMBER OF PATENT APPLICATIONS FILED & GRANTED****IN INDIA DURING THE LAST FIVE YEARS.**  |
| S. No | Particulars | Application number with Date | Total number  |
| 1 | Patent Application filed |   |   |
| 2 | Patent Granted |     |   |

|  |
| --- |
| **GIVE DETAILS OF THE NUMBER OF TRADEMARK APPLICATIONS FILED & REGISTERED****IN INDIA DURING THE LAST FIVE YEARS.**  |
| S. No | Particulars | Application number with Date | Total number  |
| 1 | Trademark Application filed |   |   |
| 2 | Trademark Registered |     |   |

|  |
| --- |
| **GIVE DETAILS OF THE NUMBER OF DESIGN APPLICATIONS FILED & REGISTERED****IN INDIA DURING THE LAST FIVE YEARS.**  |
| S. No | Particulars | Application number with Date | Total number  |
| 1 | Design Application filed |     |   |
| 2 | Design Registered |     |   |

**SECTION - B**

1. **PLEASE INDICATE THE NUMBER OF COUNTRIES WHERE YOU HAVE FILED PATENT APPLICATIONS?**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………..**

1. **WHAT IS THE AVERAGE ANNUAL EXPENDITURE OF YOUR ORGANIZATION IN R&D OVER THE LAST 5 YEARS? PLEASE SUBMIT THE INFORMATION WITH A PROOF.**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………..**

1. **DOES YOUR ORGANIZATION HAVE AN INTELLECTUAL PROPERTY POLICY? SOME SALIENT FEATURES OF THE POLICY MAY BE HIGHLIGHTED.**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………..**

1. **DOES YOUR ORGANISATION GIVE INCENTIVES TO THE INVENTORS ON FILING AND GRANT OF PATENTS? SOME EXAMPLES WOULD BE USEFUL**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………..**

1. **SOCIAL AND TECHNOLOGICAL IMPACT: WOULD YOU LIKE TO IDENTIFY ANY OF YOUR IPRS (INVENTIONS, PRODUCTS) WHICH HAVE MADE MAJOR SOCIETAL IMPACT IN TERMS OF IMPROVEMENT IN HEALTH/ AGRICULTURE/ TECHNOLOGY AREAS? A WRITE UP HIGHLIGHTING DETAILS MAY BE PROVIDED, AND ALSO WHY YOU CONSIDER SO.**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………..**

1. **ARE IP SEARCHES CARRIED OUT INTERNALLY OR OUTSOURCED? OR A COMBINATION OF THE TWO?**

🞎 External 🞎 Internal 🞎 Both

**Note:** At stage 1, validation of data is done by cross-checking each patent / trademark / design number provided by the applicant with the website of Indian Patent Office and other relevant agencies. Between stage 2 and stage 3, experts may seek a virtual interaction with any applicant and ask for information on specific points.

***To be filled by Applicant***

**Nomination Fees**

|  |  |
| --- | --- |
| **METHOD OF PAYMENT** | **Details** |
| NEFT / DD / Cheque in favour of ASSOCHAM payable at New Delhi |  |
| **Online payment details:** \*IFSC Code: HDFC0004711\*Bank Name: HDFC Bank Limited\*Bank Address: Malcha Marg, Chanakyapuri, New Delhi - 110021\*Bank Account Number: 05031110000062\*Bank Account holder name: The Associated Chambers of Commerce and Industry of IndiaIBAN (if applicable): \*BIC (SWIFT) Code: HDFCINBBIntermediary Bank (if applicable): |

I, <name of the person>\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that I have complete authority to act on behalf of the <company name> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with regards to this nomination and their participation in this Awards and I have filled the form and declare that all information provided in this nomination form is true and correctly represented.

**For more Information please contact:**

Mr. Yashpal (E: yashpal@assocham.com)

Ms. Yatika Rawat (E: yatika.rawat@assocham.com)

Ms. G Keerthi (E: g.keerthi@assocham.com)

Ms. Parul Chaturvedi (E: Parul.chaturvedi@assocham.com)