SRM Group of Institutions, Trichy - Invention Disclosure Form

1. Contact Information

Name of the inventor:

Emp. ID / Roll. No:

Designation:

Dept:

Institution:

Email Id:

Mobile No:

1. State the field of your invention?
2. Suggest a descriptive title for your invention (Not More than 15 words):

1. State the problem addressed by your invention?
2. State the solution your invention provides to the problem?
3. State of Art Literature (Only the closest literatures and brief of what it states)
4. State the advantages (Technical/Social/Economical) of your invention over existing prior art.
5. State the novelty of your invention specifically?
6. Provide a detailed description of your invention? Any drawings can be enclosed alongwith
7. Provide equivalent keywords to search your invention.
8. Industrial Applicability - Describe the areas or fields where your invention is/can be implemented
9. Has the invention been published/ presented/ demonstrated or disclosed to anyone outside of your organization? If so, provide the details of any such publication or presentation in conference/seminar/workshop or demonstration in public.
10. Was the invention developed under funding support? Yes or No

If Yes, Name of the Funding agency and attach the agreement document that may have clause on IPR generated.

1. Indicate whether any part of the invention is based on, or was made possible by the use of, Proprietary material(s) or special technique(s) obtained from a third party (such as a company or another institution).
2. Did this research use any biological material from outside? YES or NO
3. If yes, please mention the geographical origin of biological material used for the invention

b. If so, have you deposited the biological material in an International Depository.

**DECLARATION**

*I /We, the inventor(s) declare that the all the information provided above are true and correct and acknowledge the legal consequences of falsification.*

*I/We, affirm my role as the 'true and first inventor' of the disclosed invention, agree to maintain confidentiality, commit to full cooperation in patent prosecution.*

*I /We, commit to cooperating fully in the patent prosecution process, even post-departure from the institution, understanding the legal repercussions of non-cooperation.*

*I /We, declare that all contributors to the invention have been included in the inventor list here.*

*I /We, understand and affirm that we abide by the IP Policy of the SRM Group of Instititutions, Trichy; We also affirm that we have provided the details of the inventions with complete consent and that SRM Group of Institutions, Trichy shall be the Applicant of the invention.*

*I /We, commit to cooperating fully in the patent prosecution process, and that SRM Group of Institutions is not liable or responsible for any Infringement or Plagiarism, understanding the legal repercussions of the same.*

**Name(s) of Inventors: Signature of Inventor(s)**

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