

25.09.2021

From,

Dr.V.Shanmughavel

Head of the Department,

Department of Computer Science and Engineering,

SSM Institute of Engineering and Technology,

Dindigul-Palani Highway,

Dindigul.

To,

The Principal,

SSM Institute of Engineering and Technology,

Dindigul-Palani Highway,

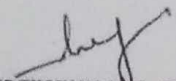
Dindigul.

Respected Sir,

Sub: Requisition for conductin **"Intellectual Property Rights for Innovators"** – reg.

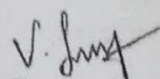
We wish to bring to your kind notice that the CSE department has planned to conduct a IPR Awareness program on **"Intellectual Property Rights for Innovators"** by Dr. T.Karpagam, Professor and Head of AIDS, Sri Ramakrishna college of Engineering, Coimbatore , for CSE faculty members on **27.09.2021** from 09.30 am to 12.30 pm in CSE LAB 2. In this regard, we seek your permission for the conduct of the Program. We request you to grant us the same.

Thanking you,

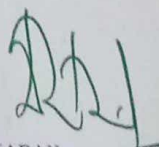
  
Programme co-ordinator

(Ms.V.Nivedhitha, AP/CSE)

Yours truly,

  
(Dr.Shanmughavel V)



  
Dr.D.SENTHIL KUMARAN, M.E., Ph.D., (NUS)

Principal

SSM Institute of Engineering and Technology

Kuttathupatti Village, Sindalagundu (Po),

Palani Road, Dindigul - 624 002.

# SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY

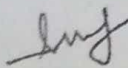
Dindigul palani highway, Dindigul – 624 002, Tamilnadu

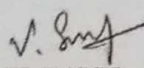
## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

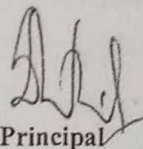
Date: 25.09.2021

### Circular


CSE department has planned to conduct a IPR Awareness program on “Intellectual Property Rights for Innovators” by Dr. T.Karpagam, Professor and Head of AIDS, Sri Ramakrishna college of Engineering, Coimbatore, for CSE faculty members on 27.09.2021 from 09.30 am to 12.30 pm in CSE LAB 2. In this regard, we seek your permission for the conduct of the Program. We request you to grant us the same.

  
Programme co-ordinator  
(Ms.V.Nivedhitha, AP/CSE)

  
HoD/CSE  
(Dr.V.Shanmughavel)

  
Principal  
(Dr.D. Senthil Kumaran)

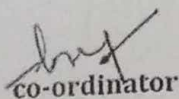


  
Dr.D.SENTHIL KUMARAN, M.E., Ph.D., (NUS)  
Principal  
SSM Institute of Engineering and Technology  
Kuttathupatti Village, Sindalagundu (Po),  
Palani Road, Dindigul - 624 002.

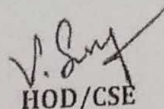
## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

### IPR AWARENESS PROGRAM

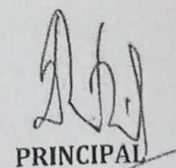
|                 |   |
|-----------------|---|
| Topic           | Intellectual Property Rights for Innovators |
| Resource Person | Dr. T. Karpagam                             |
| Date            | 27.09.2021                                  |
| Venue           | CSE Lab 2                                   |
| Time            | 09.30 am to 12.30 pm                        |

  
co-ordinator

(Mrs. V. Nivedhitha, AP/CSE)

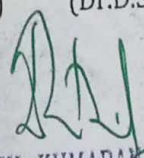
  
HOD/CSE

(Dr. V. Shanmughavel, Prof. & Head)

  
PRINCIPAL

(Dr. D. Senthil Kumaran)



  
Dr. D. SENTHIL KUMARAN, M.E., Ph.D., (NUS)  
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Palani Road, Dindigul - 624 002.



## OBJECTIVES OF THE EVENT:


The following are the seven primary objectives of the IPR awareness program:

- Promote innovation via the reward granted to the inventor with the fusion of element intake of patents
- Promote technology diffusion via publication and access to patents documents with the awarded form of inputs
- Promote international transfer of technology via international filings
- Promote transfer of technology via contractual mechanism in the relevant element of patent
- Promote wealth creation via the economic value of exclusive rights
- Promote competition via innovations behaviours
- Promote access to the patent with the authority field of things

## OUTCOMES OF THE EVENT:

The outcome of workshop is that the students got awareness on the importance of Intellectual Property Rights (IPR) and the procedure to draft a Patent and filing the patent. They got an idea of how these patents can also be communicated with the help of the institution.



  
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Principal  
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## EVENT BROCHURE:



**SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY**

Dindigul- Palani Highway, Dindigul - 624 002.  
Tamilnadu, India. 0451 - 2448800 - 2448899

**DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING**

Workshop

on

**Intellectual Property Rights for Innovators**

on 27<sup>th</sup> September 2021 (Monday) @ 09.30 am

in CSE lab 2



Resource Person

**Dr. T. Karpagam**

Professor and Head of AIDS,

Sri Ramakrishna college of Engineering, Coimbatore

**Coordinator**

Mrs.V.Nivedhitha, AP/CSE

**Convenor**

Dr.V.Shanmughavel, Prof. & Head

**Principal**

Dr.D.Senthil Kumaran

**Dr.D.SENTHIL KUMARAN, M.E., Ph.D., (NUS)**  
Principal

SSM Institute of Engineering and Technology  
Kuttathupatti Village, Sindalagundu (Po),  
Palani Road, Dindigul - 624 002.





# Agenda

09.30 am Tamilthai Valthu

09.35 am Welcome Address

09.40 am Chief Guest Introduction

09.45 am Honouring the Chief Guest

09.50 am Session by Guest Speaker

12.25 pm Vote of Thanks

12.35 pm National Anthem

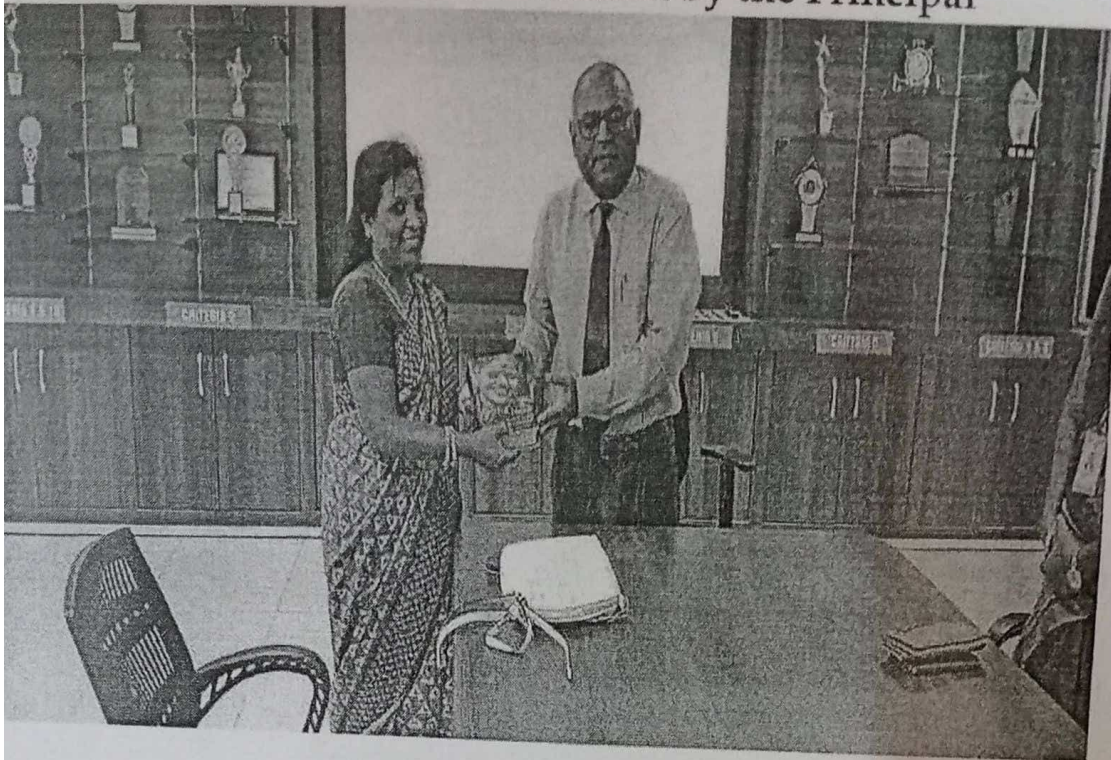


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Palani Road, Dindigul - 624 002.



## GLIMPSES OF THE EVENT

Chief Guest was honoured by the Principal



Seminar session by the chief guest to faculties



Anaipatti, Tamil Nadu, India

9WWC+M5X, Dindigul - Palani Rd, Anaipatti,  
Tamil Nadu 624705, India

Lat 10.397355°

Long 77.920146°

27/09/2021 12:25PM GMT +05:30



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Dindigul – Palani Highway, Dindigul – 624 002

## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

Date: 27.09.2021

### INTELLECTUAL PROPERTY RIGHTS FOR INNOVATORS ATTENDANCE SHEET

| S.No | Name of the Faculty | Designation/ Department | Signature      |
|------|---------------------|-------------------------|----------------|
| 1.   | Dr.V.Shunmughavel   | Professor / HoD         | V. Shun        |
| 2.   | Dr.G.Prabu          | Associate Professor     | G. Prabu       |
| 3.   | V.Nivedhitha        | Assistant Professor     | V. Nivedhitha  |
| 4.   | S.Deepika           | Assistant Professor     | S. Deepika     |
| 5.   | A.Priyanka          | Assistant Professor     | A. Priyanka    |
| 6.   | N.Padma Priya       | Assistant Professor     | N. Padma Priya |
| 7.   | N.Anu Lavanya       | Assistant Professor     | N. Anu Lavanya |
| 8.   | N.J. Divya          | Assistant Professor     | N. J. Divya    |
| 9.   | S.Divya             | Assistant Professor     | S. Divya       |

Event Incharge

HOD/CSE

Principal



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Principal

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IV YEAR

| SL. NO | REG.NO.      | STUDENT NAME      | SIGNATURE       |
|--------|--------------|-------------------|-----------------|
| 1      | 922118104001 | ARAVINDHAN M      | Aravindhan      |
| 2      | 922118104002 | BHUVANA RAJA M    | Bhuva           |
| 3      | 922118104003 | CHANDRA R         | R. Chandra      |
| 4      | 922118104004 | DEEPTHI THEJASVIE | Deepthi         |
| 5      | 922118104005 | DHANUSIYA V S     | Dhanu           |
| 6      | 922118104006 | FAHIMA RIZWANA K  | Fahima          |
| 7      | 922118104007 | GAYATHRI RS       | G. Gayathri     |
| 8      | 922118104008 | GOKUL S           | Gokul           |
| 9      | 922118104009 | HARI PRASAD M     | Hari Prasad. M  |
| 10     | 922118104010 | HINDUJA M         | Hinduja         |
| 11     | 922118104011 | INDHUMATHI M      | Indhumathi      |
| 12     | 922118104012 | JANANI M          | Janani          |
| 13     | 922118104013 | JANANI M          | Janani          |
| 14     | 922118104014 | JAYA PRIYA G      | Jaya            |
| 15     | 922118104015 | JEGAN M           | Jegan. M        |
| 16     | 922118104016 | JOAQUIN RAJ S     | Joaquin         |
| 17     | 922118104017 | JOTHIKA M         | Jothika         |
| 18     | 922118104018 | KEERTHIKA R       | Keerthika       |
| 19     | 922118104019 | KIRTHIKA K        | K. Kirthika     |
| 20     | 922118104020 | KIRUBHA SHREE V   | Kirubha Shree V |
| 21     | 922118104021 | KRISHNA V         | Krishna         |



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|    |              |                        |                        |
|----|--------------|------------------------|------------------------|
| 22 | 922118104022 | KRISHNA SREE K         | Krishna                |
| 23 | 922118104023 | LIVIN IRUTHAYA RAJ T   | Livin Iruthaya Raj T   |
| 24 | 922118104024 | LOYOLA L               | Loyola L               |
| 25 | 922118104025 | MARJIGNESH R           | Marjignesh R           |
| 26 | 922118104026 | NAGAMANI N             | Nagamani N             |
| 27 | 922118104027 | NANDHINI S             | Nandhini S             |
| 28 | 922118104028 | NANDHINI T             | Nandhini T             |
| 29 | 922118104030 | NAVEENDRAN S           | Naveendran S           |
| 30 | 922118104031 | NAVEEN KUMAR K         | Naveen Kumar K         |
| 31 | 922118104032 | OVIYA PRIYADHARSHINI V | Oviya Priyadharshini V |
| 32 | 922118104034 | POORNA KUMAR R         | Poorna Kumar R         |
| 33 | 922118104035 | PRADEEPA R             | Pradeepa R             |
| 34 | 922118104036 | PRATHIBA M             | Prathiba M             |
| 35 | 922118104037 | PRIYADHARSHINI V       | Priyadharshini V       |
| 36 | 922118104038 | PUNITH BABU M          | Punith Babu M          |
| 37 | 922118104041 | SAJIHARINIKAS          | Sajiharinika S         |
| 38 | 922118104042 | SAMRITHA ATCHAYA S     | Samritha Atchaya S     |
| 39 | 922118104043 | SARANYA S              | Saranya S              |
| 40 | 922118104044 | SARAVANAKUMARAN B      | Saravanakumaran B      |
| 41 | 922118104045 | SHERLINE SNEHA M       | Sherline Sneha M       |
| 42 | 922118104046 | SHREEVATHSAN N S R     | Shreevathsan N S R     |
| 43 | 922118104047 | SRIVANI S              | Srivani S              |



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|    |              |                   |                        |
|----|--------------|-------------------|------------------------|
| 44 | 922118104048 | SRUTHI K          | <i>Smith</i>           |
| 45 | 922118104049 | SUDHAN M          | <i>S.M</i>             |
| 46 | 922118104050 | SURIYA KUMAR V    | <i>Surya Kumar V</i>   |
| 47 | 922118104051 | THARUNSHANKAR S S | <i>VIGNESH R.</i>      |
| 48 | 922118104052 | VIGNESH R         | <i>Vignesh R.</i>      |
| 49 | 922118104053 | VIJAY G           | <i>Vijay G.</i>        |
| 50 | 922118104054 | VIJAYA SUBHA G    | <i>Vijaya Subha G.</i> |
| 51 | 922118104055 | YOGALAKSHMI B     | <i>Yogalakshmi</i>     |

*[Signature]*  
Event Incharge

*V. [Signature]*  
HOD/CSE



*[Signature]*  
Dr.D.SENTHIL KUMARAN, M.E., Ph.D., (MUS)  
Principal  
SSM Institute of Engineering and Technology  
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Dindigul – Palani Highway, Dindigul – 624 002

## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

### FEEDBACK FORM

Name of the Student : S. Deepika (Optional)

Event Title : Intellectual Property Rights for Innovators

Date : 27.9.21

Please respond to the following questions by ticking one box only for each question. If you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

#### Scoring Example

|   |   |   |   |   |
|---|---|---|---|---|
| 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|

1. Information provided at this event is relevant to you

|      |  |  |                                     |  |  |     |
|------|--|--|-------------------------------------|--|--|-----|
| High |  |  | <input checked="" type="checkbox"/> |  |  | Low |
|------|--|--|-------------------------------------|--|--|-----|

2. You are likely to use this information in the future

|      |  |                                     |  |  |  |     |
|------|--|-------------------------------------|--|--|--|-----|
| High |  | <input checked="" type="checkbox"/> |  |  |  | Low |
|------|--|-------------------------------------|--|--|--|-----|

3. Presentations were interesting

|      |  |  |                                     |  |  |     |
|------|--|--|-------------------------------------|--|--|-----|
| High |  |  | <input checked="" type="checkbox"/> |  |  | Low |
|------|--|--|-------------------------------------|--|--|-----|

4. You would recommend this event to others

|      |  |                                     |  |  |  |     |
|------|--|-------------------------------------|--|--|--|-----|
| High |  | <input checked="" type="checkbox"/> |  |  |  | Low |
|------|--|-------------------------------------|--|--|--|-----|

5. Overall, the event was worthwhile

|      |  |                                     |  |  |  |     |
|------|--|-------------------------------------|--|--|--|-----|
| High |  | <input checked="" type="checkbox"/> |  |  |  | Low |
|------|--|-------------------------------------|--|--|--|-----|

6. The venue was suitable

|      |  |                                     |  |  |  |     |
|------|--|-------------------------------------|--|--|--|-----|
| High |  | <input checked="" type="checkbox"/> |  |  |  | Low |
|------|--|-------------------------------------|--|--|--|-----|

7. Comments/ suggestions (If any)

|  |
|--|
|  |
|--|



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Principal

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S.D.K.  
Signature





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## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

### FEEDBACK FORM

Name of the Student : A. Priganka (Optional)

Event Title : Intellectual Property Rights for Innovators

Date : 27.09.2021

Please respond to the following questions by ticking one box only for each question. If you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

#### Scoring Example

|   |   |   |   |   |
|---|---|---|---|---|
| 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|

1. Information provided at this event is relevant to you

|      |                                     |                          |                          |                          |                          |     |
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| High | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
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2. You are likely to use this information in the future

|      |                          |                                     |                          |                          |                          |     |
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| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
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3. Presentations were interesting

|      |                          |                                     |                          |                          |                          |     |
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| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
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4. You would recommend this event to others

|      |                          |                                     |                          |                          |                          |     |
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| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
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5. Overall, the event was worthwhile

|      |                          |                          |                                     |                          |                          |     |
|------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-----|
| High | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
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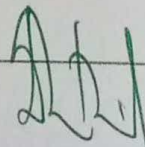
6. The venue was suitable

|      |                          |                                     |                          |                          |                          |     |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|

7. Comments/ suggestions (If any)

|  |
|--|
|  |
|--|



  
Signature  
Dr. D. SENTHIL KUMARAN, M.E., Ph.D., (NUS)  
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Dindigul – Palani Highway, Dindigul – 624 002

## DEPARTMENT OF COMPUTER SCIENCE AND ENGINEERING

### FEEDBACK FORM

Name of the Student : \_\_\_\_\_ (Optional)

Event Title : Intellectual property Rights for Innovators

Date : 27.09.2021

Please respond to the following questions by ticking one box only for each question. If you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

#### Scoring Example

|   |   |   |   |   |
|---|---|---|---|---|
| 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|

1. Information provided at this event is relevant to you

|      |                                     |                          |                          |                          |                          |     |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|

2. You are likely to use this information in the future

|      |                          |                                     |                          |                          |                          |     |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|

3. Presentations were interesting

|      |                          |                                     |                          |                          |                          |     |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----|

4. You would recommend this event to others

|      |                          |                          |                                     |                          |                          |     |
|------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-----|
| High | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-----|

5. Overall, the event was worthwhile

|      |                                     |                          |                          |                          |                          |     |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|

6. The venue was suitable

|      |                                     |                          |                          |                          |                          |     |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|
| High | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Low |
|------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----|

7. Comments/ suggestions (If any)

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|



*[Signature]*

Signature

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