

**Dr. Mahalingam College of Engineering and Technology, Pollachi-642 003**

**(An Autonomous Institution)**

**Office of Dean – Research & Innovation**  
**Request Form for Technology Commercialization**

**IPR**  
**FORM 8**

**Date:**

Name of the Department:	
Name of the Inventors with Designation and Address	Enclosure : Annexure 1
Title of the Patent	
Journal Number	
Name of Patent office	
Application Number	
Date of Filing	
Date of Publication	
Date of Granting & Patent Number	
Feasibility study for the commercialization of this invention	Enclosure: Annexure 2
Potential Companies identified for Commercialization	Enclosure: Annexure 3 (with full address and contact number)
Geographical Areas of Commercialization	Enclosure : Annexure 4
Additional facilities to be created	Enclosure : Annexure 5
Revenue to be generated and financial support required (Pl. provide a detailed budget)	Enclosure : Annexure 6
Duration in Years	

**Signature of the Inventor**  
(1<sup>st</sup> inventor on behalf of all inventors)

**Head of the Department**

**IPR Coordinator**

**Dean – R&I**

**Vice Principal**

**Principal & Joint Secretary**

**Secretary**