

APPLICATION FORM

INVENTOR AWARD UNIVERSITI TEKNOLOGI **MALAYSIA**

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Da	te received: //
Rec	eived by:

In	Sti	ruc	tic	m.

- This form must be filled completely and submitted to the secretariat before the closing date as advertised.
 Applicant must have at least 1 filed/registed intellectual property with MyIPO/ICC/RMC.
- 3. Only information for the last 5 years will be considered.
- 4. Supplementary document must be enclosed with your application.
- 5. Use additional sheets if necessary.

Name of Applicant :	
Name of RA/Institute/Faculty :	
Tel/Mobile/Fax No. :/	
Email Address :	

1.0 Invention Disclosure:

Title of Invention	Date of Disclosure	Name of Inventor/s: 1. Principal Inventor 2. Co- Inventor
1.		
2.		
3.		
4.		
5.		

2.0 Patent / Industrial Design Filing/Patent Issuance:

Patent/UI/ID/TM		Patent/UI/ID/TM					
Filing/A	Application	Issuance/Registered:					
Date of Filing	Filing	Date of Grant/Registra					
/Application	/Application	Issuance/Registered	No.				
	No.						
	Filing/A Date of Filing	Filing/Application Date of Filing Filing /Application /Application	Filing/Application Issuance Date of Filing Filing Date of /Application /Application Issuance/Registered				

3.0 Copyright/IC Design Layout/Trade Secret:						
Title of Copyright/IC Design Layout/Trade Secret:		Approval Date	Year			
1.						
2.						
3.						
4.						
4.0 Pre-Commercia	alisation					
Grant No.:	Sponsor:		Amount (RM):			
1.						
2.						
4.0 Commercialisa	tion :					
i) Licensee/Assigne	e/Spin Off Co.:					
ii) Licensing Agreeme	ent : Date//	_				
iii) Fees & Royalty : R	KM					
iv) Net Revenue to U	JTM : RM					
RM10,000.00- RM49,000.00						
RM50,000.00 - RM499,000.00						
RM500,000.00 - RM 999,000.00						
> RM1,000,000.00						
Please specify (if necessary):						

5.0 Other Awards (Related to the Invention):						
Title of Invention	Name of Award(s)		UTM	National	International	
1.	Name of Award(s)					
2.						
3.						
4.						
6.0 Other Recognition (Re	lated to the Invention)	:				
	Type of Recognition			National	International	
1.	1.					
2.						
3.						
4.						
Signature of Applicant: Rec			commended by:			
(signature)		(signature)				
Date:		Date:				
		Dean of Research Alliance/Senior Director of Institute/ Deputy Dean of Faculty (Research & Innovation) seal:				