

**INTER UNIVERSITY CENTRE FOR IPR STUDIES
COCHIN UNIVERSITY OF SCIENCE AND TECHNOLOGY**

Request Date:

Request Number (For office purpose):

Request form for providing assistance for filing Provisional patent application

[While filling the format, please delete the guidance cues (in grey) under different heads]

1. Applicant(s) Name and address in Full :

Name in Full (Expand your initials)	Address of the Applicant	
	House No.	
	Street	
	City	
	State	
	Country	
	Pin code	

2. Inventor(s) Name and address in Full [Not required if Applicant(s) and Inventor(s) are the same]:

Name in Full (Expand your initials)	Address of the Inventor	
	House No.	
	Street	
	City	
	State	
	Country	
	Pin code	

3. Phone and Email :

4. Please state if you are Natural person/small entity/others (if others please specify):

5. Title of the Invention:

6. Field/Area of Invention:

7. Background, Objectives and description of the Invention (details to be attached as Annexure):

8. Details of the Demand Draft (Amount, Dated, DD Number) *:

*** Please add applicable taxes to the professional charges prior to drawing a Demand Draft**