

Govt. of N.C.T. of Delhi DELHI TECHNOLOGICAL UNIVERSITY

(Formerly Delhi College of Engineering) Shahbad Daulatpur, Bawana Road-Delhi-42

F. No. DTU/R&D/2024/85/ 2779

Date: 06/05/2025

To
All the HoDs
Delhi Technological University, '
Delhi

Dear Sir/Madam,

Please find enclosed a Performa for "Application for Award for Innovation Research Awards for the Inventor of Delhi Technological University" with a request to circulate the same among the faculty members of your Department for necessary action. The complete and filled up applications in Google Form https://forms.gle/ssuUr7fFSdwPMhAv8 along with enclosures (Proofs of patent certificate) must be submitted online latest by 18th May 2025.

In addition, the applicants are requested to submit the hard copy of the application (enclosed herewith) duly forwarded by HoD to the R&D office by 18th May 2025 upto 05.00 P.M.

(Prof. Girish Kumar) Dean (R&D)

Date: 06/05/2025

F. No. DTU/R&D/2024/85/2779

Copy to

- 1. PS to the Hon'ble Vice Chancellor, DTU
- 2. Registrar, DTU
- 3. Head, Computer Centre with a request to upload the same on the DTU's website

4. All HoDs

(Prof. Girish Kumar) Dean (R&D) To.

The Dean (R&D)
Delhi Technological University
Shahbad Daulatpur,
Bawana Road,
Delhi-1100042

Subject: Application for Award for Innovation Research Awards for the Inventor of Delhi Technological University.

Dear Sir,

This is in reference to guidelines for the award for Innovation Research Awards for the Inventor of DTU, I hereby wish to apply for the award as per the notification no. F.DTU/Council/Bom-Notification/66/2024/481 dated: 03.07.2024.

1. Details of Patents.

- (A) Name of Applicant
- (B) Designation
- (C) Patent Titled Name
- (D) Name of Inventor(s)
- (E) Patent Certificate
- (F) Patent Granted Number
- (G) Date of Patent Granted

I hereby declare that the above claim is being made by me as per guidelines issued vide letter No. F.DTU/Council/Bom-Notification/66/2024/481 dated: 03.07.2024. In case of any violation, I will be held responsible and DTU will free to take appropriate action and the award money and certificate of merit will be liable to be recovered from me.

Signature of Faculty/Student
Name of Faculty/Student:
Department:
Emp. Code:
Mobile No
Bank Account No
IFSC CODE/ MICR CODE
Bank Name
Branch Address

In case the applicant is student and University faculty is co-inventor then,

Signature of	Faculty
Name of Fac	ılty

On the basis of above information, I hereby endorse that I have verified all the above details and forward the same.

Signatu	re of I	łoD,	•••	• • • •	 ٠.	٠.	٠.	٠.		٠.	•
Name o	f HoD				 						