

## **Indian Institute of Technology Kanpur Office of Outreach Activities**

No: IITK/CCE/MOU/

Date:

## **Note File**

	Name	Department	Contact No.	Email Id.					
PC									
Co-PC									
Name of the Party with which MoU/Agreement is proposed:									
Type of MoU (please tick): Sponsored Research/ Consultancy/ Non-Disclosure/ Academic/ Technology Transfer/ Material Transfer/ Software Licensing/ Any other (Please Specify):									
Origin of the proposal: Web site/ Site Visit/ By Invitation/ Submission of Proposal/ Any other (Please Specify):									
Level of Collaboration: Individual/ Departmental/ Multi- department/ Institute									
1. Background/Genesis:									
2. Profile of the Partner Organisation:									
3. Profile of the contact from the partner Organisation:									
4. The expected benefits to IIT Kanpur:									
	5. Obligations/commitments on the part of the partner organisation:								
	6. Obligations/commitments on the part of IIT Kanpur:								
	7. Expected Commercialisation/Te	chnology transfer	:						

8. Ownership of Intellectual Property Rights (IPRs):

9. Dispute resolution arrangement:										
10. Legal Jurisdiction:										
<ol> <li>I/We have read the MoU/Agreement/Contract.</li> <li>I/ We have no conflict of Interest with the Partner Organization.</li> <li>I/ We will abide by the terms and conditions of MoU/Agreement/Contract and ensure that all due diligence (in terms of confidentiality as required) will be done by me/us.</li> </ol>										
<ul><li>4. It is my/our responsibility to take a declaration of confidentiality from the project staff, scholars and students working on this project, if any.</li><li>5. I hereby undertake that less than 10% of my academic time will be utilized for the aforesaid program &amp; also my regular academic activities will not be hampered due to this program.</li></ul>										
The draft MoU/Contract/Agreement enclosed may kindly be approved.										
(Signature of PC and Co-PC)										
Recommended/Not recommended										
(Signature of Head of Department)										
(For the Office Use)										
The proposed authorised signatories of the MoU/Contract/Agreement:										
Programme Coordinator	HoD		Professor-in- Charge, OOA	Deputy Director		Director				
Remarks (if any):										
Checked by		Recommended by		Approved/Not approved						
Sr. Superintendent (S.G.)		Professor-in-Charge, OOA		Director						