Indian Institute of Technology Kanpur
Office of Centre for Continuing Education

No: IITK/CCE/MOU/2019/
Date:

Note File

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<tr>
<th>Name</th>
<th>Department</th>
<th>Ph. No</th>
<th>Email</th>
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<td>PC</td>
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<td>Co-PC</td>
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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/Technology transfer:

8. Ownership of Intellectual Property Rights (IPRs):

9. Dispute resolution arrangement:

10. Legal Jurisdiction:

I/We certify that:

1. I/ We have read the MoU/Agreement/Contract.
2. I/ We have no conflict of Interest with the Partner Organization.
3. 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.
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.

The draft enclosed may kindly be approved.

(Signature of the PC and Co-PC)

Recommended/Not recommended

(Signature of the Head CCE)

(For the Office Use)

The proposed authorised signatories of the MoU/Contract/Agreement:

<table>
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<tr>
<th>PC</th>
<th>HOD</th>
<th>Head CCE</th>
<th>Dy. Director</th>
<th>Director</th>
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Remarks (if any):

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<th>Checked by</th>
<th>Recommended by</th>
<th>Approved/Not approved</th>
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<td>Project Executive/Supdt.</td>
<td>Head CCE</td>
<td>Director</td>
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