Indian Institute of Technology Kanpur
Application Form
To start/participate as Faculty in a Company as Faculty Entrepreneurship

Date: ............

A) Academic Information

(Separate form for each faculty involved in the Faculty Entrepreneurship activities)

1. Name of Faculty:

2. Department:

3. P.F. No.:

4. Academic Load on the Applicant:
   
   No of Research Students:
   
   Ph.D.: M.Tech:
   
   Research Projects/Consultancy Projects:

   Administrative:

5. Any other relevant academic information:

B) Enterprise related information:

1. Name/Proposed Name of the Enterprise:

2. Name, designation and address of all Faculty / Staff /students of the institute involved in this enterprise:

3. Is the enterprise: A start-up (expected date of incorporation)
   
   Already Existing (year of incorporation_______)
   
   Is the structure other than Private Limited Company:

4. State Briefly the mission of the enterprise & the role of the Faculty in the Company: (add separate paper, if required)
5. Briefly summarize the activities you plan to carry out in the Enterprise. Please also attach a Copy of the Memorandum of Association & Articles

6. Are you, in this enterprise, planning to use knowledge /technology /intellectual property developed at the institute? If yes, then briefly describe the above, including the persons involved.

7. What is the planned equity structure/distribution of the Enterprise?

8. Please state the number of hours likely to be dedicated in Faculty Company a week

9. Please state, if there is any other information relevant to your Enterprise

Declaration: The activities of the Company are not in conflict with the interest of the institute and my participation in the company will not be in conflict of my assigned duties and responsibilities of the institute.

Signature (with date):
(Name of the Faculty)

Recommended & Forwarded by:
(Signature of Head of Department)

Recommended & Forwarded by:
(Signature of Dean, Faculty Affairs)

Approved by:
(Director)
Indian Institute of Technology Kanpur

Faculty Entrepreneurship

Response Form

Name of the Faculty:
Department:
Name/Proposed of the Enterprise:

This is with reference to your application for the formation and participation in the proposed/existing company. We are pleased to inform you that the Director has approved for the same subject to the following:

1. The proposed company will be incubated at SIDBI Innovation & Incubation Centre, IITK. An incubation agreement will be signed between the Company and the IITK.
2. The company will sign an agreement with IITK for the terms of the engagement of the faculty in the Company.
3. The above mentioned agreements will have to be signed within a months time otherwise the approval for the said Faculty Entrepreneurship application would stand void and a fresh application would have to be moved for approval.
4. The faculty and the Company will strictly adhered to the norms of the institute and rules and restrictions as laid down in various paragraphs in the Faculty Entrepreneurship Policy. These would include but not limited to leave/consultancy rules and terms of employment in the institute.

Signature
(Dean, Faculty Affairs)