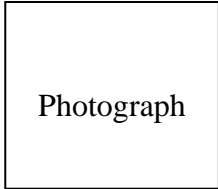


**OFFICE OF THE CONTROLLER GENERAL OF PATENTS, DESIGNS, TRADEMARKS AND
GEOGRAPHICAL INDICATIONS, MUMBAI
MINISTRY OF COMMERCE AND INDUSTRY
DEPARTMENT OF INDUSTRIAL POLICY AND PROMOTION
UDYOG BHAWAN, NEW DELHI**

REGISTRATION FORM

For registering as a faculty for
National Institute of Intellectual Property Management, Nagpur



1. Name: _____

2. Qualification with % of marks obtained and name of the University:

| S.No. | Qualification | Name of Board/University | % of marks obtained |
|-------|---------------|--------------------------|---------------------|
| | | | |

3. Present employment/assignments and working experience:

4. Experience of working in IPR field, specify no. of presentation given on IPR topics :

5. Telephone No. _____ Fax No. _____

6. E-mail: _____

7. Address for Communication: _____

P.S.: The registration of the applicant as Guest Faculty to the NIIPM shall be the sole discretion of the Controller General of Patents, Designs and Trade Marks, Mumbai. The name as faculty on approval by the CG PDTM shall be mentioned on our website.

Date of Application: _____

Signature of the Applicant