

FORM 1
THE PATENTS ACT, 1970
(39 of 1970)
&
THE PATENTS RULES, 2003
APPLICATION FOR GRANT OF PATENT
[See sections 7,54 & 135 and rule 20(1)]

(FOR OFFICE USE ONLY)

Application No.:
Filing Date:
Amount of Fee Paid:
CBR No.:
Signature:

1. APPLICANT(S):

Sr.No.	Name	Nationality	Address	Country	State
1	Dr. Laxman Shinde	India	Head, School of Education (IASE), Devi Ahilya Vishwavidyalaya, Indore, Madhya Pradesh, India	India	Madhya Pradesh
2	Dr. Surendra Kumar Tiwari	India	Professor, Department of Education, Swa.Gulab Bai Yadav Smriti Shiksha Mahavidyalaya, Borawan Khargone, Madhya Pradesh, India	India	Madhya Pradesh

2. INVENTOR(S):

Sr.No.	Name	Nationality	Address	Country	State
1	Dr. Laxman Shinde	India	Head, School of Education (IASE), Devi Ahilya Vishwavidyalaya, Indore, Madhya Pradesh, India	India	Madhya Pradesh
2	Dr. Surendra Kumar Tiwari	India	Professor, Department of Education, Swa.Gulab Bai Yadav Smriti Shiksha Mahavidyalaya, Borawan Khargone, Madhya Pradesh, India	India	Madhya Pradesh

3. TITLE OF THE INVENTION: Analytic Study of The Quality Assurance Practices In Higher Education of Madhya Pradesh, India

4. ADDRESS FOR CORRESPONDENCE OF APPLICANT / Telephone No.:
AUTHORISED PATENT AGENT IN INDIA:

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5. PRIORITY PARTICULARS OF THE APPLICATION(S) FILED IN CONVENTION COUNTRY:

Sr.No.	Country	Application Number	Filing Date	Name of the Applicant	Title of the Invention
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6. PARTICULARS FOR FILING PATENT COOPERATION TREATY (PCT) NATIONAL PHASE APPLICATION:

International Application Number	International Filing Date as Allotted by the Receiving Office
PCT//	

7. PARTICULARS FOR FILING DIVISIONAL APPLICATION

Original (first) Application Number	Date of Filing of Original (first) Application
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8. PARTICULARS FOR FILING PATENT OF ADDITION:

Main Application / Patent Number:	Date of Filing of Main Application
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9. DECLARATIONS:

(i) Declaration by the inventor(s)

I/We ,Dr. Laxman Shinde,Dr. Surendra Kumar Tiwari, is/are the true & first inventor(s) for this invention and declare that the applicant(s) herein is/are my/our assignee or legal representative.

(a) Date: -----

(b) Signature(s) of the inventor(s):

(c) Name(s): Dr. Laxman Shinde,Dr. Surendra Kumar Tiwari

(ii) Declaration by the applicant(s) in the convention country

I/We, the applicant(s) in the convention country declare that the applicant(s) herein is/are my/our assignee or legal representative.

(a) Date: -----

(b) Signature(s) :

(c) Name(s) of the singnatory: Dr. Laxman Shinde,Dr. Surendra Kumar Tiwari

(iii) Declaration by the applicant(s)

- **The Complete specification relating to the invention is filed with this application.**
- **I am/We are, in the possession of the above mentioned invention.**
- **There is no lawful ground of objection to the grant of the Patent to me/us.**
- **I am/We are, the assignee or legal representative to true first inventors.**

10. FOLLOWING ARE THE ATTACHMENTS WITH THE APPLICATION:

Sr.	Document Description	FileName
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I/We hereby declare that to the best of my/our knowledge, information and belief the fact and matters stated hering are correct and I/We request that a patent may be granted to me/us for the said invention.

Dated this(Final Payment Date): -----

Signature:

Name: Venugopal Chandika

To The Controller of Patents

The Patent office at MUMBAI

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