

NELSON MANDELA AFRICAN INSTITUTION OF SCIENCE OF SCIENCE AND TECHNOLOGY [NM-AIST]



INTELLECTUAL PROPERTY MANAGEMENT AND INCUBATION FORM

NM-AIST IPMS Tool No: IPMO 001-2020

Prepared by:

Intellectual Property Management Office [IPMO]
Research and Innovation [RI] Department
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NOTE:

This form should be filled by an individual(s) or applicant(s) who wishes the Nelson Mandela African Institution of Science and Technology (NM-AIST) to consider his or her idea or intellectual property for further development and grant of approval for incubation as per NM-AIST requirements.

1. Title or Name of Innovation or Invention

2. Title of Your Research/Thesis if the Innovation or Invention originates from

3. Are you applying as an Individual or as a Group?

(Please tick in the appropriate box)

 Individual:.....

 Group:.....
2.1 Details of a Lead Inventor (Applicant)

Full Name:	
Contact phone:	
Email address:	
Postal address:	
District, Region/Province	
Country:	
Occupation:	
Company / Firm / Institution:	
Sex:	
Age:	
Highest Education Level:	
Area of Specialization:	
Name of Institute/ University of highest degree?	

2.2 Details of a Next Inventor

Full Name:	
Contact phone:	
Email address:	
Postal address:	

District, Region/Province	
Country:	
Occupation:	
Company / Firm / Institution:	
Sex:	
Age:	
Highest Education Level:	
Area of Specialization:	
Name of Institute/ University of highest degree?	
Signature	

2.3 Details of a Next Inventor

Full Name:	
Contact phone:	
Email address:	
Postal address:	
District, Region/Province	
Country:	
Occupation:	
Company / Firm / Institution:	
Sex:	
Age:	
Highest Education Level:	
Area of Specialization:	
Name of Institute/ University of highest degree?	
Signature	

4. Description of Innovation or Invention

Brief Description of your innovation, invention and or technology you plan to develop further or incubate – <i>max 500 words</i>	
Stage of development for your innovation, invention and or technology	
Brief description of the kind of support you need from NM-AIST and its key partners and collaborators to develop and commercialize your idea, innovation, invention and technology (<i>support can be in the form of IP Creation (R&D), IP Protection, IP Validation, Knowledge and Skills, Business Registration, Business Development, Marketing Services and IP Commercialization</i>)	
Do you have a market for your innovation, invention and or technology?	
Is the innovation, invention and or technology your own?	Yes_____ No_____
Any other detail which would help in evaluating your application	
Please give names and addresses of up to three referees who are acquainted with your career profession and or achievement.	

5. Declaration

By signing this form the undersigned applicant (s) declares that the Information provided is true and agrees to be bound by NM-AIST Intellectual Property Management Policy and Procedures.

Name of Lead C Inventor (Applicant)

Signature

Date