UNIVERSITY OF THE PHILIPPINES

**Office of the Vice Chancellor for Research and Development**

Intellectual Property and Technology Transfer

**Request to Use UP Trademarks, Symbols, Images, Icons and Other Marks**

**(for UP Unit, UP-Accredited Student Organization or UP-Affiliated Organization)**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ORGANIZATION** | | | | | | | | | | | |
| **Organization/Unit:** |  | | | | | | | | | | |
| **Director/President:** |  | | | | | | | | | | |
| **Office Address:** |  | | | | | | | | | | |
| **Contact No.:** |  | | | | **E-mail Address:** | |  | | | | |
| **REQUEST** | | | | | | | | | | | |
| **Date of Request:** |  | | | | **Activity/ Event/ Project Title:** | | | | | | |
| **Start of Activity:** |  | | | |  | | | | | | |
| **End of Activity:** |  | | | |
| **Project Head:** |  | | | | **Contact No.:** | |  | | | | |
| **ID No.:** |  | | | | **E-mail Address:** | |  | | | | |
| **Purpose:** *(Please explain briefly)* | | | | | | | | | | | |
| **UP Trademark/s to be used:** | | | | | | | | | | | |
| Seal | | Sablay | | | |  | | | | |  |
| Oblation | | Name *(Please specify)* | | | |  | | | | |  |
| UP Fighting Maroons | | Icon *(Please specify)* | | | |  | | | | |  |
|  | |  | | | | | | | |  |
| **Item/Merchandise:** | | | | | | | | | | | |
| T-shirts/Hoodies/Apparel | | Uniform | | | | | | | | Notebooks/Stationeries |  |
| Bags | | Campaign Materials *(Please specify)* | | | | | | | |  |  |
| Lanyards/Bag tags | | Other Merchandise *(Please specify)* | | | | | | | |  |  |
|  | |  | | | | | | | |  |
| **Means of Selling:** | | | | | | | | | | | |
| Stall/Boutique *(Please specify location)* | | |  | | | | | | | |  |
| Online *(Please specify URL)* | | |  | | | | | | | |  |
| Others *(Please specify)* | | |  | | | | | | | |  |
| We don’t intend to sell | | |  | | | | | | | |  |
| **Name of Supplier:** |  | | | | **Contact No.:** | | | |  | | |
| **Business Address:** |  | | | | | | | | | | |
| **-------------------------------------- D O N O T W R I T E B E L O W --------------------------------------** | | | | | | | | | | | |
| **Processed By:** |  | | | **TM License No.:** | | | |  | | | |
| **Signature:** |  | | | **Date Processed:** | | | |  | | | |

**REQUIREMENTS**

**For UP student organization, UP-affiliated alumni association, or UP-affiliated foundation:**

Certificate of Accreditation as a UP student organization, UP-affiliated alumni association, or UP- affiliated foundation, as issued by the appropriate accrediting unit/ office

Duly- approved Constitution (for student organization), SEC Certificate of Registration and Articles of Incorporation (for alumni association or foundation) - for first-time applicants only

Approval of the Dean for college-based activity or Office of the Vice Chancellor for Student Affairs, through the Office of the Student Activities (OSA), for campus-wide activity

Photocopy of UP Student/Alumni ID of the project head/contact person

Design/s to be approved

**For UP unit/office:**

Approval of the Dean/Director on the conduct of the activity/ event

Photocopy of Employee ID of the project head/contact person

Design/s to be approved