

**FORM XIV**  
**APPLICATION FOR REGISTRATION OF COPYRIGHT**  
**[SEE RULE 70]**

Diary Number:

To

The Registrar of Copyrights,  
 Copyright Office,  
 Department of Industrial Policy & Promotion,  
 Ministry of Commerce and Industry,  
 Boudhik Sampada Bhawan,  
 Plot No. 32, Sector 14, Dwarka,  
 New Delhi-110075  
 Email Address: copyright@nic.in  
 Telephone No.: (Office) 011-28032496, 08929474194  
 Sir,

In Accordance with Section 45 of the Copyright Act, 1957 (14 of 1957), I hereby apply for registration of Copyright and request that entries may be made in the Register of Copyrights as in the enclosed Statement of Particulars.

1. I also send herewith duly completed the Statement of further Particulars relating to the work. (for Literary/Dramatic, Musical, Artistic works only) **Artistic works**

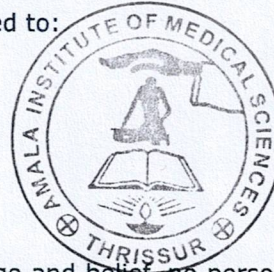
2. In accordance with rule 16 of the Copyright Rules, 1958, I have sent by prepaid registered post copies of this letter and of the Statement of Particulars and Statement of Further Particulars to other parties concerned as shown below:

Name of Party	Address of Party	Date of Dispatch
AMALA INSTITUTE OF MEDICAL SCIENCES AIMS	DIRECTOR FR. JULIOUS ARAKKAL, AMALA INSTITUTE OF MEDICAL SCIENCES AIMS, THRISSUR, KERALA, INDIA-680555	
DR ANISH S	ASSOCIATE PROFESSOR IN GENERAL MEDICINE , AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA-680555	
DR NAYANA SUNIL	ASSISTANT PROFESSOR IN PHYSIOLOGY, AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA-680555	

[See columns 7,11,12, and 13 of the Statement of Particulars and party referred in col.2 (e) of the Statement of Further Particulars.]

3. The prescribed fee has been paid, as per details below:

4. Communications on this subject may be addressed to:



**AMALA INSTITUTE OF  
 MEDICAL SCIENCES AIMS  
 DIRECTOR FR. JULIOUS  
 ARAKKAL, AMALA INSTITUTE  
 OF MEDICAL SCIENCES AIMS,  
 THRISSUR, KERALA, INDIA-  
 680555  
 9661029336**

5. I hereby declare that to the best of my knowledge and belief, no person, other than to whom a notice has been sent as per paragraph 2 above any claim or interest or dispute to my copyright of this work or its use by me.

6. I hereby verify that the particulars given in this Form and the Statement of Particulars and Statment of Further Particulars are true to the best of my knowledge, belief and information and nothing has been concealed there from.

**List of Enclosures:**

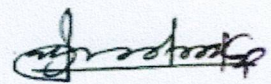
1. 2 Copies of Work
2. DD/IPO of Rs.0 Per Work
3. Authorization from author
4. Search Certificate from Trade Mark Office (TM -60)

5. If the application is being filed through attorney , a specific Power of Attorney in original duly signed by the applicant and accepted by the attorney

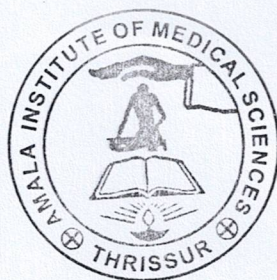
Place:

Date: **04/11/2025**

**For : AMALA INSTITUTE OF MEDICAL SCIENCES AIMS**



**Proprietor**



## STATEMENT OF PARTICULARS

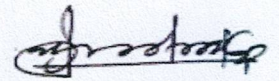
Diary Number:

1.	Registration Number	
2.	Name, Address and Nationality of the Applicant	NAME: AMALA INSTITUTE OF MEDICAL SCIENCES AIMS, ADDRESS: DIRECTOR FR. JULIOUS ARAKKAL, AMALA INSTITUTE OF MEDICAL SCIENCES AIMS, THRISSUR, KERALA, INDIA-680555, Indian NAME: DR ANISH S, ADDRESS: ASSOCIATE PROFESSOR IN GENERAL MEDICINE , AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA- 680555, Indian NAME: DR NAYANA SUNIL, ADDRESS: ASSISTANT PROFESSOR IN PHYSIOLOGY, AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA-680555, Indian
3.	Nature of the Applicant's interest in the Copyright of the work	Owner
4.	Class and description of the work	Artistic Work
5.	Title of the work	AMALA VAYOSOUKHYAM BROCHURE
6.	Language of the work	English
7.	Name, Address and Nationality of the Author and if the Author is deceased, the date of decease.	NAME: DR ANISH S, ADDRESS: ASSOCIATE PROFESSOR IN GENERAL MEDICINE , AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA- 680555, Indian, NAME: DR NAYANA SUNIL, ADDRESS: ASSISTANT PROFESSOR IN PHYSIOLOGY, AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA-680555, Indian,
8.	Whether the work is Published or Unpublished	Unpublished
9.	Year and Country of first publication, and Name, Address and Nationality of the publisher	N/A
10.	Year and Countries of subsequent publications, if any, and Name, Address and Nationality of the publisher	N/A
11.	Name, Address and Nationality of the Owners of the various rights comprising the copyright in the work and extent of rights held by each, together with particulars of assignments and licence. If any	NAME: AMALA INSTITUTE OF MEDICAL SCIENCES AIMS, ADDRESS: DIRECTOR FR. JULIOUS ARAKKAL, AMALA INSTITUTE OF MEDICAL SCIENCES AIMS, THRISSUR, KERALA, INDIA-680555, Indian NAME: DR ANISH S, ADDRESS: ASSOCIATE PROFESSOR IN GENERAL MEDICINE , AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA- 680555, Indian NAME: DR NAYANA SUNIL, ADDRESS: ASSISTANT PROFESSOR IN PHYSIOLOGY, AMALA INSTITUTE OF MEDICAL SCIENCES, AMALA NAGAR, THRISSUR, KERALA, INDIA-680555, Indian
12.	Name and address and nationality of other persons, if any authorized to assign or licence the rights comprising the copyright	N/A
13.	If the work is an 'Artistic work', the location of the original work, including name, address and nationality of the person in possession of the work, (In the case of an architectural work, the year of completion of the work should also be shown)	N/A
14.	If the work is an 'Artistic work' which is used or capable of being used in relation to any goods or services, the application should include a certification from the Registrar of Trade Marks in terms of the provision to Sub-Section (i) of Section 45 of the Copyright Act, 1957	N/A



15.	If the work is an 'Artistic work' whether it is registered under the Designs Act 2000 if yes give details.	N/A
16.	If the work is an 'Artistic work' capable of being registrar as a design under the Designs Act 2000, whether is has been applied to an article though an industrial process and,if yes ,then number of times it is reproduced	N/A
17.	Remarks, if any	, (i) A COPY OF THE WORK IS ANNEXED WORK. (ii)THE ARTISTIC WORK SHALL NOT BE USED IN RELATION TO ANY GOODS OR SERVICES. (iii)THE COPYRIGHT IN THE ARTISTIC WORK SHALL NOT SUBSIST IF THE WORK HAS BEEN APPLIED TO AN ARTICLE THROUGH INDUSTRIAL PROCESS & REPRODUCED MORE THAN 50 TIMES.

Place:

Date: **04/11/2025****For : AMALA INSTITUTE OF MEDICAL SCIENCES AIMS**

**Proprietor**

## STATEMENT OF FURTHER PARTICULARS

(For Literary/Dramatic, Musical and Artistic works only)

Diary Number:

## 1. Is the work to be registered

- (a) an original work? : Yes
- (b) a translation of a work in the public domain? : N.A.
- (c) a translation of a work in which Copyright subsists? : N.A.
- (d) an adaptation of a work in the public domain? : N.A.
- (e) an adaptation of a work in which Copyright subsists? : N.A.

## 2. If the work is a translation or adaptation of a work in which copyright subsists

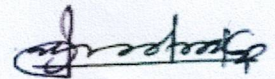
- (a) Title of the original work : N.A.
- (b) Language of the original work : N.A.
- (c) Name, address, and nationality of the author of the original work and if the author is deceased, the date of decease : N.A.
- (d) Name, address, and nationality of the publisher, if any, of the original work : N.A.
- (e) Name, address, and nationality of the publisher, or adaptation including the name, address and nationality of party authorizing : N.A.

## 3. Remarks, if any

Place:

Date: **04/11/2025**

For : AMALA INSTITUTE OF MEDICAL SCIENCES AIMS

Betsy

Proprietor

Dr. BETSY THOMAS  
MD, FRCOG, DNB, MICOG  
PRINCIPAL  
AMALA INSTITUTE OF MEDICAL SCIENCES  
AMALA NAGAR, THRISSUR-680 555

