



OHIO STATE LICENSING PROPOSAL

Thank you for your inquiry regarding the use of The Ohio State University's identifying marks! Please complete the following application in order to have your products reviewed at our monthly licensing review meeting. Completed applications are reviewed the second Tuesday of each month, and you will be notified of our decision in writing. Review decisions are not given over the phone.

Ohio State operates a selective licensing program, and not all applicants are awarded a license. **If** you are offered a license agreement, you will be required to obtain standard product liability insurance, join the fair labor association and pay an annual advance against royalties. Our current royalty rate is 10%.

We must receive the following items before we can consider your request:

1. Your completed **and signed** Licensing Application;
2. Samples of **all** items you are asking to produce, these should **not** be Ohio State samples, but items enhanced with **other** marks. Samples cannot be returned, and are disposed of at the University's discretion;
3. A completed Product Submission form for each product you are submitting for review;
4. An audited financial statement, annual report, or income tax return for the last business year.

*This document is a proposal only, and **does not** authorize the submitter to manufacture, promote or distribute any merchandise that bears the identifying marks of The Ohio State University. Unauthorized use of the University's marks is a violation of both state and federal law, subject to criminal and civil remedies.*



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Company Name:	
Address:	
City, State, Zip:	
Province/Country:	
Fax Number:	
Website:	

Licensing Contacts:	First & Last Name:	Email Address:	Phone Number:
Primary Contract Contact:			
Company Exec:			
Financial/Royalty:			
Artwork:			
Sales Rep:			

1. Location of other office(s), manufacturing and/or distribution facilities, and retail outlets
 (please include offshore facilities, if any):

2. Other names under which you do business:

3. If this business is a subsidiary, please give name & address of parent company:

4. Type of organization: [] Corporation [] Partnership [] Sole Proprietorship
 If incorporated, state and year in which incorporated: _____



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5. Year the above business began operations: _____ Tax I.D. Number: _____

6. Company's yearly sales of licensed products \$: _____

7. **All** products you hope to produce that will bear our identifying marks:

8. Are you the: [] Original Manufacturer [] Distributor [] Other (please explain):

9. Method for applying the marks to the products: [] Screen printing [] Embroidery [] Other (please explain):

10. Is your product, or any of its components, manufactured offshore? [] Yes [] No
If yes, please specify:

11. If approved, how long would it take you to begin production of products bearing our marks?

12. Have you produced any items bearing our marks prior to this proposal? [] Yes [] No
If yes, please explain:



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13. Please list other licenses you hold:

Licensors:	Contact:	Phone Number:

14. What is your proposed method of distribution & target markets? (Please be specific)

Product:	Distribution:	Target Market:

15. Please list three credit references (include primary bank or financial institution):

Name:	Address:	Phone Number:

16. Have any products you produce ever been involved in a product liability claim? [] Yes [] No

If yes, please explain:



Trademark & Licensing Services
1100 Kinnear Road, Suite 210
Columbus, OH 43212
P (614) 292-1562 F (614) 292-2023

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I have read and understand this application and hereby state that to the best of my knowledge all information provided is accurate. I also grant The Ohio State University permission to verify as well as exchange information on the company filing this application, including requesting reports from credit reporting agencies. I am aware that this information may be used to evaluate this application. Upon request, The Ohio State University will provide the name and address of any agency that has provided a credit report on the company filing this application.

Signature: _____
Name: _____
Date: _____

RETURN COMPLETED APPLICATION TO:

Office of Trademark & Licensing Services
The Ohio State University
1100 Kinnear Road, Suite 210
Columbus, OH 43212