Invention Disclosure Form

*Invention: A novel and useful idea relating to a process, a machine, an article of manufacture, a compound, a composition of matter, or an apparatus or improvement thereof made or conceived by the developer. Inventions include new or improved devices, systems, chemical compounds, mixtures, bioengineered organisms, unexpected/unobvious research results, etc.*

Please answer each question to the best of your knowledge. Attach additional sheets as necessary. Sketches, photos, reports, charts, tables, graphs, presentations, and manuscripts must be included to fully and properly evaluate the invention.

1. **CONTRIBUTORS:** List all who intellectually contributed to the invention. (Note: Inventorship for patent purposes is determined by law – “One must contribute to the conception to be an inventor”).

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| --- | --- | --- |
| Name: | Title/Position: | School/Company:  Dept/Division: |
| Email: | Phone: | Fax: |
| Work Address: | Home Address: | Mailing Address (if different): |
| Citizenship: | Other Info: | |
| Nature of Contribution (please provide information explaining why this person is a co-inventor) | | |
| Dept. Admin. Assistant Name: | | Phone: |
|  | | |
| Name: | Title/Position: | School/Company:  Dept/Division: |
| Email: | Phone: | Fax: |
| Work Address: | Home Address: | Mailing Address (if different): |
| Citizenship: | Other Info: | |
| Nature of Contribution (please provide information explaining why this person is a co-inventor) | | |
| Dept. Admin. Assistant Name: | | Phone: |
|  | | |
| Name: | Title/Position: | School/Company:  Dept/Division: |
| Email: | Phone: | Fax: |
| Work Address: | Home Address: | Mailing Address (if different): |
| Citizenship: | Other Info: | |
| Nature of Contribution (please provide information explaining why this person is a co-inventor) | | |
| Dept. Admin. Assistant Name: | | Phone: |

1. **TITLE OF INVENTION:** Create a short title that is NOT so specific as to enable others to reproduce the Invention.

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1. **ABOUT THE INVENTION:** This information will be used to determine patentability, commercial uses, and potential licensees of the invention. Please provide as many details as possible.

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| 1. **Type of Invention** i.e. research findings/discovery, process, composition of matter, device, software, etc? |
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| 1. **Stage of development** i.e. concept, experimental data, computer simulation, bench or working prototype, etc? |
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| 1. **Briefly summarize your invention/discovery.** What is its function or what does it do? What are the practical and commercial applications of it? |
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| 1. **What is unique, novel, and/or better as compared to what already exists?**  State to what you are comparing. |
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| 1. **Are there limitations to be overcome or other tasks to be done prior to practical applications?** **\_\_** Yes  **\_\_**No   **If yes,** i**s work on the invention continuing?**  **\_\_** Yes  **\_\_**No |
| Explain: |
| 1. **Were any tests or developments conducted outside of the inventor(s)/researcher(s) lab(s)?** **\_\_** Yes  **\_\_**No |
| **If yes**, where and why? |
| 1. **List below any known pre-existing invention/compound from which yours derives from, integrates or requires.** |
|  |
| 1. **Have you completed a search of the related literature or competing invention/research?** **\_\_** Yes  **\_\_**No   **Are you aware of related developments by others?** **\_\_** Yes  **\_\_**No |
| **If yes**, please **attach** a list of citations (copies of publications or marketing materials are greatly appreciated) |

1. **Invention Opportunities:** The following info is important for the funding and marketing of the Invention.

|  |  |
| --- | --- |
| 1. **Based on your knowledge, please provide names and contact information of companies, universities, or organizations that are, or may be, interested in licensing, manufacturing, using, and/or further developing your Invention?** | |
| **Name** | **Contact Information** |
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| 1. **Have any discussions with companies occurred or been scheduled?** **\_\_** Yes  **\_\_**No   **If yes, was a CDA, NDA, or Secrecy agreement signed prior to discussion? \_\_** Yes  **\_\_**No  \*(CDA) Confidentiality Agreement or (NDA) Non-Disclosure Agreement | |
| Please provide company name, contact info, and level of discussion. Attach agreement(s). | |
| 1. **If a company is interested in licensing your invention, would you be interested in assisting or working with the company to develop your invention into a product? \_\_** Yes  **\_\_**No | |
| **If yes**, under what condition (partner in company, research agreement, consultant to company, etc)? | |

1. **IMPORTANT DATES:** The following information is important for deciding priority of the Invention. While the United States patent law allows inventors up to one year to file a patent application after the first publication, public use, or sale; many foreign patent laws do not allow public disclosure in any form prior to filing.

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| **Event** | **Date** | **Evidence** |
| **Initial conception**: Inventor(s) formed a definite and permanent idea of a complete and operable Invention |  | Provide written record  (notebook, letter, email, etc) **or**  if Oral Disclosure, indicate to whom |
| **First written description of complete Invention** |  | Provide written record  (notebook, letter, email, etc) |
| **Invention completed:** First successful demonstration or first actual reduction to practice |  | Provide written or physical evidence. (sample, completed testing or lab results, prototype, publication, etc) |
| **Has this work been:** Check all that apply  Submitted for publication  Accepted for publication  Published |  | **If Yes**, please list and provide a copy with this form. |
| **Has the Invention or an overview of the Invention been disclosed in a(n):**  Check all that apply  Abstract  Paper  Poster  Talk  Lecture  Website  News Story  Thesis  Handout  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | **If Yes**, please list and provide a copy with this form. |

1. **FUNDING:** If the research that led to the Invention was sponsored, we may have obligations to the sponsor. Please check all that apply and, in the box below, provide the information requested. Include those who provided materials in exchange for intellectual property rights or licensing rights.

**Federal Government** (agency, grant number, PI, and dates of performance)

**Non-Federal Government** (agency, grant number, PI, and dates of performance)

**Private/Public Foundations** (organization name, contact name, award name and/or number, and dates)

**Industry or Private Company Sponsors** (company name, contract number, and dates)

**Creighton University** (school and department)

**Other** (name, contact information, dates)

1. **CONTRIBUTOR(S) SIGNATURE(S):** By signature below I (we) agree that the above statements are true to the best of my (our) knowledge and hereby agree that Creighton University’s Intellectual Resource Management (IRM) Technology Transfer Office (TTO) has my (our) permission to disclose this information for evaluation purposes under protection of confidentiality. I (we) understand this Invention will be governed by Creighton’s Intellectual Property Policy 4.2.3.

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| --- | --- | --- |
| **Contributor 1** Name (print) | Signature | Date |
| **Contributor 2** Name (print) | Signature | Date |
| **Contributor 3** Name (print) | Signature | Date |
| **Contributor 4** Name (print) | Signature | Date |

Principal Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_