INVENTION DECLARATION FORM

1. Title of Invention

2. Inventors

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NnameName | Department | Affiliation with Institute (i.e. department, student, staff, visitor) | Address, contact phone no., e-mail | % Contribution to the Invention |
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|  |  |  |  |  |

3. Contribution to the Invention

Each contributor/potential inventor should write a paragraph relating to his/her contribution and include a signature and date at the end of the paragraph.

4. Description of Invention

(Please highlight the novelty/patentable aspect. Attach extra sheets if necessary including diagrams where appropriate).

5. Why is this invention more advantageous than present technology?

What are its novel or unusual features?

What problems does it solve?

6. Sponsorship

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|  |  |
| --- | --- |
| Government Agency & Department |  |
| % Support |  |
| Contract/Grant No. |  |
| Contact Name |  |
| Phone No. |  |
| Address |  |

|  |  |
| --- | --- |
| Industry or other Sponsor |  |
| % Support |  |
| Contract/Grant No. |  |
| Contact Name |  |
| Phone No. |  |
| Address |  |

7. Where was the research carried out?

8. What is the potential commercial application of this invention?

9. Was there transfer of any materials/information to or from other institutions regarding this invention?

If so please give details and provide signed agreements where relevant.

10. Have any third parties any rights to this invention?

If yes, give names and addresses and a brief explanation of involvement.

11. Are there any existing or planned disclosures regarding this invention?

Please give details.

12. Has any patent application been made? Yes/No

If yes, give date:\_\_\_\_\_\_\_\_\_\_\_\_ Application No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of patent agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please supply copy of specification.

13. Is a model or prototype available? Has the invention been demonstrated practically?

I/we acknowledge that I/we have read, understood and agree with this form and the Institute’s *Intellectual Property and Procedures* and that all the information provided in this disclosure is complete and correct.

I/we shall take all reasonable precautions to protect the integrity and confidentiality of the IP in question.

Inventor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Inventor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Inventor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Inventor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Reviewed By IP Committee on : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Decision :

Signed : Technology Transfer Manager : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_