**For Office Use Only:**

Disclosure #: \_\_\_\_\_\_\_\_\_\_\_

Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_



**INNOVATION DISCLOSURE FORM**

*Revised August, 2017*

*Please Note:*

1. Read and fill out all sections. Attach supplemental information to the original disclosure form.
2. Fully disclose all funding sources/material sources for any research linked to the innovation.
3. While we can accept electronic copies of the disclosure form, we must have a hard copy of the form with signatures of all inventors mailed or hand-delivered to our office within seven business days.
4. We cannot accept any disclosure forms that have missing or incomplete information, missing signatures, or unspecified division of inventor royalty share.
5. If you have any questions, please call the Innovation Partnership Services Office (IPSO) at (336) 256-2047.
6. Please submit your completed disclosure to:

**Innovation Partnership Services Office**

**1613 Beverly and Irene Moore Humanities and Research Administration Building**

**Greensboro, NC 27402**

**Office:** (336) 256-2047

**Or:** IPSO@uncg.edu

1. After reviewing your innovation’s disclosure, a staff member from IPSO will contact you and all co-innovators for a meeting to discuss the contents of your disclosure.

Thank you in advance for your cooperation and effort!

**I. Description**

**Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Conception Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Has the innovation been reduced to practice?**

**Have working prototypes, product apparatus or compositions, etc. been made and tested?**

**A. General description**

***Please identify methods and/or materials used, its operation, advantages, and utility. Pictures, data tables, preprints of upcoming publications, or anything that broadens the scope of the innovation and makes the disclosure complete should be included as attachments.***

**B. Immediate/Future Applications**

***Please list below as many actual or hypothetical products or services that can be created or improved by your innovation. Be adventurous; try to think of broader or narrower applications for the invention than those that immediately come to mind, as well as applications that are outside of your own field.***

**Can you identify any potential licensees of this technology?**

**Do you have a contact with any of these individuals/companies?**

**Is work on the innovation continuing?**

**Are there any test data or efficiency studies performed?**

**Are there any limitations to be overcome or other tasks to be done prior to practical application?**

**II. Public disclosure**

***Any public, non-confidential disclosure of the details of the innovation constitutes public disclosure that may bar patent protection. Public disclosure includes (but is not limited to) dissertations, journal articles, conference presentations, seminars, poster presentations, and demonstrations.***

**Has this innovation been publicly disclosed in any form?**

 **Disclosure Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you plan to disclose it in the future?**

 **Disclosure Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If you answered “yes” to either of the above questions:**

**Has there been any public use or sale of products embodying the innovation?**

**Are you aware of any related developments, publications, or research by others?**

***If a public disclosure has taken place, please be prepared to show the Innovation Partnership Services Office copies of any written materials, pictures, video, etc.***

**III. Source of Funds/Materials**

***If you have more than two funding sources, please provide the same information requested below on another sheet of paper.***

A. Funding Sources

**Sponsor #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**UNCG Grants & Contract #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Research Period Beginning & Ending Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sponsor #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**UNCG Grants & Contract #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Research Period Beginning & Ending Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Don’t forget to include copies of your funding agreements!*

B. Material Transfer Sources

***Please submit copies of all material transfer agreements so that we may assess whether this innovation is subject to any commitments or restrictions arising from the terms of that agreement.***

**IV. Inventor Information**

***Please read and understand the assignment language below. Identify all inventors or contributors to this innovation. If the number of inventors/contributors exceeds the space provided below, please continue on another sheet of paper.***

***Note: the first person listed will be considered the primary contact.***

I (We) hereby assign all right, title and interest to this invention to UNCG and agree to execute all documents as requested, assigning to UNCG our rights in any patent or copyright application filed on this invention, and to cooperate with the UNCG Innovation Partnership Services Office (IPSO) in the protection of this invention property. UNCG will share any royalty income derived from this invention with the inventor(s) according to its written policies, as may be updated from time to time. For purposes of this assignment, “invention” means all inventions (whether patentable or not), copyrightable materials, computer software, semiconductor mask works, tangible research property, and trademarks.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Percentage Share of Inventor Royalties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Percentage Share of Inventor Royalties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Percentage Share of Inventor Royalties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**