# **Appalachian State University**

## **Invention and Discovery Disclosure Form**



Please submit the completed form via email to: ip@appstate.edu

Submit a hardcopy with original signatures to:
IP Council
C/O Office of Research Protections
376 John Thomas Building
Appalachian State University
Boone, NC 28608

For the sake of readability, hand written disclosures will not be accepted.

Questions? Email ip@appstate.edu or call (828) 262-2692

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### I. Inventors

Identify all inventors below and obtain signatures. Please attach an additional copy of this page if needed.

Inventor's Name (Prin	nary Cont	tact):	
			Department:
			_ Email:
			Telephone:
Permanent Address:			Telephone:
City:	_ State:	Zip code:	Country:
Percent Share of Invent	or Royaltie	es:	
Signature:			
Check one: □Faculty	☐ Staff	☐ Student ☐ Other	r (describe):
Co-Inventor's Name:			
			_ Department:
			_ Email:
			Telephone:
Permanent Address:			Telephone:
City:	_ State:	Zip code:	Country:
Percent Share of Invent	or Royaltie	es:	
Signature:			
Check one: □Faculty	□ Staff	□ Student □ Other	r (describe):
Co-Inventor's Name:			
			Department:
_			Email:
			Telephone:
_			Telephone:
			Country:
Percent Share of Invent	or Royaltie	es:	
Signature:			
Check one: □Faculty	□ Staff	□ Student □ Other	r (describe):
• •		d/or other technicians dual(s) be included as <b>CONFIDEN</b>	

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## **II. Description of Invention**

1. Invention Title:
2. Select a category for the invention:
□ Nano-Technology
☐ Computational and Efficiency Enhancers
☐ Biotechnology and Agro-medicine
☐ Health Care/Medical Devices
☐ Software
☐ Manufacturing/Process Enhancers
□Other:
3. Check all boxes that apply to the category of the invention:
☐ New Process
□ New Device
☐ New Product
☐ New use for an Existing Process/Product
☐ New Composition of Matter
☐ Improvement to an Existing Process/Product
4. Invention conception date:
4. Invention conception dute.
5. Describe how the invention came to be:
6. Has the invention been reduced to practice? $\square$ Yes $\square$ No
7. Have working prototypes, products apparatus or compositions, etc. been made and tested? $\Box$ Yes $\Box$ No
8. Do supporting data notebook or laboratory records exist? □Yes □ No Give reference numbers and physical location or explanation of electronic records, but do not enclose:

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9. PLEASE DESCRIBE THE INVENTION IN DETAIL. Attach separate pages with related figures, drawings and/or photographs that help to describe the nature of operation and invention applications. Diagrams and visual representations are strongly encouraged. Note that the description must be sufficiently detailed to permit technical and patentability evaluation.	
10. Describe the particular problem the invention seeks to solve.	
11. What existing technologies or products solve or attempt to solve the same or similar problems?	
12. What advantage(s) does this invention provide over existing technologies or products?	
13. What novel and/or unusual features distinguish this invention from existing technologies or products	s?

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14. What are possible uses for the invention? List all possible commercial applications of the invention. In addition to immediate applications, are there other uses that might be realized in the future (i.e., other contemplated forms of the invention or alternate aspects/uses)?
15. What research plans do you have for further development of the invention? Are plans in progress? Scheduled? Are plans dependent upon commercial or federal sponsorship?
III. Disclosures
1. Have you published, submitted, prepared or publicly presented data, theses, reports, abstracts or journal articles pertaining to the invention? Please list these disclosures with actual or projected publication dates and attach copies, if possible. If disclosed to specific individual(s), please give name(s).
2. Has the invention been disclosed to industry representatives? Has any progress been made toward the commercialization of this invention?
3. Has there been any public use or sale of products embodying the invention? $\Box$ Yes $\Box$ No

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# IV. Resources and Funding

1. What university resources (e.g., materials, facilities, employee time and effort) were used in the development of the invention?			
<ol> <li>List any funding sources and associated information below. Please attach a copy of any contract or agreement and fill in any associated information below:</li> <li>a. Complete Name of Government Agency:</li> </ol>			
b. Contract or Grant #:			
c. Name of Industrial Company:			
d. Name of Private Sponsor:			
e. State or Federal Appropriation:			
f. Please list all relevant ASU Account Numbers:			
3. Have any materials or confidential information belonging to another institution or company been used in the conception or development of the invention? (e.g., materials received from colleagues at ASU or at another institution).			
Institution providing the Material or Information:			
<ul> <li>4. If the response to question 3 was "yes," has a Material Transfer Agreement/ Confidentiality Agreement (or License, Purchase or any other Agreement) been signed?</li> <li>☐ Yes ☐ No</li> <li>If yes, please list all Agreements that apply:</li> </ul>			

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# V. Technology Transfer

1. Identify any known competitive products and their manufacturers. What firms do you think may be, or are, interested in the invention? Why? Please list any companies that have been contacted or should be contacted about licensing and commercializing the invention and provide contact information for people if possible.
For each company previously contacted please check all that applies:  Contacted about the technology – only provided non-confidential information  Disclosed information about this invention under Confidentiality Agreement  Company was not contacted, but inventors feel that company might be interested.  Disclosed confidential information to the company without signing a Confidentiality Agreement
<ol> <li>Is there any urgency in making a patent application?         □Yes □ No         If yes, please describe and estimate the likelihood that similar technology may be developed elsewhere:</li> </ol>
VI. Other Information
<ol> <li>Does this technology require approval by regulatory agencies EPA, USDA, FDA, OSHA, other ☐ Yes ☐ No ☐ Not Sure         If yes, please explain.</li> </ol>
2. Please list any keywords that may assist the office in conducting research and gaining a better understanding of the technology.

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#### VII. Goals of Inventor

Check any and all that apply. It is important to note that the University, at its sole discretion, may commercialize its inventions in any manner consistent with its mission, objectives, policies, and rules and regulations; however, the personal goals of each inventor are important considerations in this process, and are therefore documented below. ☐ I would like the University to consider prosecution of patent applications, in its name, for this invention in: The U.S., because: (Provide rationale for request) Internationally, because: (Provide rationale for request) ☐ I would like the University to consider commercializing this invention via: New company start-up without my direct involvement New company start-up with my direct involvement, in the role of: ☐ President/CEO  $\Box$  CTO ☐ Consultant Licensing/assignment to commercial entity in exchange for \_\_\_\_\_% stock/equity Royalties / licensing fees ☐ I would like the University to release the intellectual property rights for this invention to ☐ I would like the University to release the intellectual property rights for this invention to the public domain.

#### IX. Additional Information (optional)

If you have any additional information that you would like to provide, please add it below and/or attach relevant documentation.

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