(UNIVERSITY NAME)

DISCLOSING AN INVENTION

The business of a university is the creation and dissemination of knowledge. Making an invention and putting it to use in the service of the public is a thoroughly valid mode of accomplishing this objective.

Accordingly, the University encourages the inventive process and within the limits of financial practicality, can often provide advice and assistance in bringing inventions to the point of public use. The University's Patent Policy sets forth the University's position in detail. A copy may be obtained on request to the Technology Liaison Office (TLO).

In the sense used here, an "invention" has a presumed commercial use and value. From this certain caveats follow as a consequence:

1. Disclose first, publish later. Disclosing your invention by no means proscribes publication; on the other hand, premature publication can have both legal and tactical effects on the University's efforts to commercialize it.

2. Disclose your idea verbally to the TLO as soon as the invention is clearly conceptualized. It is not wise to wait for reduction to practice, and the TLO can assist you in determining the timing for completing the disclosure form.

3. Leave procedural questions to the specialists. For example, Federal funding does not usually impede commercialization. What sometimes constitutes a patentable invention is a complex legal question.

If you think you have made an invention, but you are not sure, consult the TLO before completing the formal disclosure form. We will find out for you.

If you think, but are uncertain, that your invention has commercial merit, say so. Perhaps we can encourage you, or save a lot of wasted effort.

Since the majority, if not all of the disclosures we receive are in the very early stages, it is critical that we have your total cooperation and assistance during the patenting and marketing process of your invention. This is very important, and by placement of your signature on the Disclosure of Invention Form, we will accept the fact that you are in agreement, and will work with us to the best of your ability.

The form attached is offered as a guide to help in getting your invention down in writing.

Disclosure No. _____

(University Name)

INVENTION DISCLOSURE APPROVAL SHEET

The following questions should be answered by the Department Chairman or Dean, as applicable. The questions are designed to verify the source of the invention and to obtain the viewpoint of other technically qualified scientists as to the uniqueness and efficacy of the invention. This approval MUST be completed before submission of the Invention Disclosure Form to the Office Of Technology Liaison.

1. Title Of Invention

2. List Of Inventor(s)

	Name	Position
A.	_____	_____
B.	_____	_____
C.	_____	_____

3. Ownership

In my opinion this invention is:

_____ A. Owned by the University in accordance with the Patent Policy.

_____ B. Was developed by the inventor(s) without use of University time, facilities or materials and is related to the inventor's area of technical responsibility to the University. Belongs to the inventor(s).

4. Advisor approval for student submissions (if applicable):

_____ _____
Advisor Date

Reviewed for University ownership:

_____ _____
Name Date

_____
Title

Disclosure No._____

(University Name)

DISCLOSURE OF INVENTION

Submit this disclosure to the Technology Liaison Officer (TLO) or contact the TLO for assistance. Disclosure must contain the following items: (1) title of invention, (2) a complete statement of invention and suggested scope, (3) results demonstrating the concept is valid, (4) variations and alternate forms of the invention, (5) a statement of the novel features of the invention and how these features distinguish your invention from the state of the art as known to you, (6) applications of the technology, and (7) supporting information.

(1) Technical Title:

Layman's Title:

Inventor(s):

1. Signature_____ Revenue Share ____% Date_____

Printed Name In Full_____ Citizenship_____
First Middle Last

Home Address_____ City_____ State_____ Zip_____

Location_____ Phone Extension_____

2. Signature_____ Revenue Share ____% Date_____

Printed Name In Full_____ Citizenship_____
First Middle Last

Home Address_____ City_____ State_____ Zip_____

Location_____ Phone Extension_____

3. Signature_____ Revenue Share ____% Date_____

Printed Name In Full_____ Citizenship_____
First Middle Last

Home Address_____ City_____ State_____ Zip_____

Location_____ Phone Extension_____

Disclosure No._____

(Continuation Page)
DISCLOSURE OF INVENTION

(2) Statement of Invention and Suggested Scope:

Give a complete description of the invention. If necessary, use additional pages, drawings, diagrams, etc. Description may be by reference to a separate document (copy of a report, a preprint, grant application, or the like) attached hereto. If so, identify the document positively.

Inventor(s)_____Date_____Witness_____Date_____

_____Date_____Witness_____Date_____

_____Date_____Witness_____Date_____

Disclosure No._____

(Continuation Page)
DISCLOSURE OF INVENTION

3. Results demonstrating the concept is valid.

Cite specific results to date. Indicate whether you have completed preliminary search studies, laboratory model or, prototype testing.

4. Variations and alternative forms of the Invention.

State all of the alternate forms envisioned to be within the full scope of the Invention. List all potential applications and forms of the Invention, whether currently proven or not. (For example, chemical inventions should consider all derivatives, analogues, etc.)

Inventor(s)_____Date_____Witness_____Date_____

_____Date_____Witness_____Date_____

_____Date_____Witness_____Date_____

5. Novel Features.

a. Specify the novel features of your invention. How does the invention differ from present technology?

b. What is the deficiency in the present technology which your invention improves upon, or the limitations it overcomes?

6. Application of the technology.

List all products you envision resulting from this invention, and whether these products could be developed in the near term (less than 2 years) or long term (more than 2 years).

Inventor(s)_____ Date_____ Witness_____ Date_____

_____ Date_____ Witness_____ Date_____

_____ Date_____ Witness_____ Date_____

Disclosure No._____

(Continuation Page)
DISCLOSURE OF INVENTION
SUPPORTING INFORMATION

1. Are there publications-theses, reports, preprints, reprints, etc. pertaining to the invention? Please list with publication dates. Include manuscripts for publication (submitted or not), news releases, feature articles and items from internal publications.

2. What was the date the invention was first conceived?_____ Is this date documented?_____ Where?_____ Are laboratory records and data available? Give reference numbers and physical location, but do not enclose.

3. A literature search should be done by the Inventor to determine publications relevant to the Invention. Please list these publications and any related patents known to you.

4. Date, place, and circumstances of any disclosure. If disclosed to specific individuals, give names and dates.

5. Was the work that led to the invention sponsored? If yes, check the appropriate blank(s). Government agency___, industrial company___ university ___ other___.

Sponsor	Contract No.

6. What firms do you think may be, or are interested in the invention. Why? Name companies and specific persons if possible.

Disclosure No._____

(Continuation Page)
DISCLOSURE OF INVENTION
SUPPORTING INFORMATION

7. Being for the moment the Devil's Advocate, what do you see the greatest obstacle to the adoption of your invention?

8. Alternate Technology and Competition

a. Describe alternate technologies of which you are aware that accomplish the purpose of the invention.

b. List the companies and their products currently on the market which make use of these alternate technologies.

c. List any research groups currently engaged in research and development in this area.

9. Future Research Plans.

a. What additional research is needed to complete development and testing of the invention? What are the timeframes and estimated budget needed for completion of each step?

b. Is this research presently being undertaken? Yes___No___ Actively pursued? Yes___No___ If yes, under whose sponsorship?_____If no, should corporate sponsorship be pursued? Yes___No____

10. Attach, sign, and date additional sheets if necessary. Enclose sketches, drawings, photographs and other materials that help illustrate the description. (Rough artwork, flow sheets, Polaroid photographs and penciled graphs are satisfactory as long as they tell a clear and understandable story.)

(UNIVERSITY NAME)

DISCLOSING A MONOCLONAL ANTIBODY

The business of a university is the gathering and dissemination of knowledge. Making an invention and putting it to use in the service of the public is a thoroughly valid mode of accomplishing this objective.

Accordingly, the University encourages the inventive process and within the limits of financial practicality, can often provide advice and assistance in bringing inventions to the point of public use. The University's Patent Policy sets forth the University's position in detail. A copy may be obtained on request to the Office of Technology Liaison. Monoclonal antibodies are inventions and as such are covered under the Patent Policy.

Many monoclonal antibodies have commercial potential but, due to a twist in the patent laws which did not foresee the technology, patenting of these inventions can sometimes hinder the commercial use of the cell lines. This is due to the fact that a deposition of the cell line is required, and after the patent issues, anyone can get the line from the depository. Thus, the University does not attempt to patent these inventions and will attempt to commercialize them only if the inventor is willing to restrict distribution of the actual cell lines to the licensee and to his colleagues in university research. The distribution to colleagues is done under a short agreement whereby they agree not to further distribute the cell line and to use it only in pursuit of their own research. A copy of this agreement may be obtained from the Office of Technology Liaison.

This is very important, and by placement of your signature on the Monoclonal Disclosure Form, we will accept the fact that your are in agreement, and will work with us to the best of your ability.

The form attached is offered as a guide to help in getting your invention down in writing.

Disclosure No._____

MONOCLONAL DISCLOSURE APPROVAL SHEET

The following questions should be answered by the Department Chairman or Dean, as applicable. The questions are designed to verify the source of the invention and to obtain the viewpoint of other technically qualified scientists as to the uniqueness and efficacy of the invention. This approval MUST be completed before submission of the attached Monoclonal Disclosure Form to the Office Of Technology Liaison.

1. Title of Invention

2. List of Inventor(s)

	Name	Position
A.	_____	_____
B.	_____	_____
C.	_____	_____

3. Ownership

In my opinion this invention is:

_____A. Owned by the University in accordance with the Patent Policy

_____B. Was developed by the inventor(s) without use of University time, facilities or materials and is related to the inventor's area of technical responsibility to the University. Belongs to the inventor(s).

4. Advisor approval for student submissions (if applicable):

_____ _____
Advisor Date

5. Reviewed for University ownership:

_____ _____
Name Date

_____
Title

MONOCLONAL DISCLOSURE FORM

Submit this disclosure to the Technology Liaison Officer (TLO) or contact the TLO for assistance. The disclosure MUST contain the following items: (1) descriptive title of the cell line, preferable including its intended use, (2) results demonstrating the specificity of the line, (3) supporting information and (4) summary sheet giving the technical details of the cell line and its intended use.

(1) Descriptive Title:

Inventors:

1. Signature_____ Revenue Share____% Date_____

Printed Name _____ Citizenship_____
First Middle Last

Home Address_____ City_____ State___ Zip_____

Location_____ Phone Extension_____

2. Signature_____ Revenue Share___% Date_____

Printed Name_____ Citizenship_____
First Middle Last

Home Address_____ City_____ State___ Zip_____

Location_____ Phone Extension_____

3. Signature_____ Revenue Share____% Date_____

Printed Name_____ Citizenship_____
First Middle Last

Home Address_____ City_____ State___ Zip_____

Location_____ Phone Extension_____

(2) Results demonstrating the specificity of the cell line

Cite specific results to date and the analytical method(s) used to determine specificity. If other methods are also available, please specify.

Disclosure No._____

(Continuation Page)
MONOCLONAL DISCLOSURE FORM

(3) Supporting Information

a. Are there publication-theses, reports, preprints, reprints, etc. pertaining to the invention? Please list with publication dates. Include manuscripts for publication (submitted or not), news releases, feature articles and items from internal publication, and attach them to this disclosure form. b. Specify the location of the cell line and security precautions taken to prevent unauthorized release.

c. Has the cell line previously been released to anyone? If so, give specific individuals, affiliation and dates. Indicate in each case whether or not an agreement restricting further distribution was executed.

d. Was the work that led to the cell line sponsored? If yes, check the appropriate blank(s). Government agency____, industrial agency____, university___other_____.

Sponsor Contract No.

e. What firms do you think may be, or are interested in the cell line and why? Name companies and specific persons if possible.

f. Being for the moment the Devil's Advocate, what do you see the greatest obstacle to the commercial use of the monoclonal antibody?

MONOCLONAL SUMMARY SHEET

Cell Line Designation_____ Date_____ Discl. No._____

Description of Use:

Specificity :
Immunogen :
Recipient :
Ig :
Precipitate :
Screen :
Panel :
Myeloma :
Organ :
Fusor :
Mw :
Selection :
Cloning :
Feeders :
Procedure 1 :
Procedure 2 :
Procedure 3 :
Procedure 4 :

Applicable Publications: