

CONFIDENTIAL

Invention Disclosure Form

The beginning of a conversation

- This questionnaire is an easy way to let us know you made an invention and give us basic information. You don't need to convince us of anything!
- We will contact you very soon after we receive your questionnaire to ask any further questions we may have, and to explain the next steps.
- Answer each question by clicking a check box or by typing into the associated table or fillable box. For tables, please add rows as necessary.
- If you are unsure how to answer a question, just leave it blank and we'll talk to you about it later. Or, email us at tto@umass.edu and we'll help you answer it.
- We will keep you informed as we evaluate patentability, market potential and licensability, and we will discuss any decisions with you before they are made.
- If we file a patent application, our patent attorney will speak to you directly to learn about the invention in more detail.

You can email us the completed and signed form using the TTO email address tto@umass.edu.

| |
|--|
| <p><u>For Internal Use</u></p> <p>Docket No.: UMA _____</p> <p>Date Received: _____</p> |
|--|

Invention Disclosure Form

Technology Transfer Office
 University of Massachusetts Amherst
 Telephone: 413-545-3606
 Email: tto@umass.edu
 Website: www.umass.edu/tto

Please Provide a Short Title for the Invention

| | Inventor Name | Professional Title or Student Type (e.g. graduate undergrad) | Department Affiliation (Note: At time of invention. If not UMA, list employer) | Email Address | Phone Number |
|----|---------------|--|---|---------------|--------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

1. General Description.

Please provide a description of the invention. **If you have one, please attach a manuscript or other document that describes the invention in more detail.**

2. Previous Invention Disclosure.

Is this invention disclosure related to any earlier invention disclosure here or at another institution?

Yes No

If **Yes**, please identify the UMA disclosure number, if known, or describe. If another institution, please state.

3. Improvements to the Art.

How does the invention improve upon what was previously known in the field?

4. Products and Services.

What products or services are made possible by the invention?

5. Competing Approaches.

Please describe any competing approaches at any stage of development (e.g. existing commercial products or services, R&D, etc.) that your invention may compete with.

6. Potential Companies and Contacts for Licensing.

Please list any companies you know of that might be interested in this invention.

For the above companies, please list the name and contact information for any relevant contacts you may have that you'd like to share with us.

| Company | Name | Contact Information |
|---------|------|---------------------|
| | | |
| | | |
| | | |

7. Relevant References.

Please list any publications or patents you know of that might be relevant to this invention. (Note: We will also do patent and literature searches.)

8. Previous Public Disclosure.

Has any aspect of this invention been publicly disclosed?

- Yes No

Such public disclosure includes, but is not limited to, online abstracts or research papers, posters or oral presentations at a scientific conference, discussions with non-UMass individuals, inclusion in a student thesis or dissertation.

If the answer to the above is **Yes**, please describe each public disclosure and include the date when each disclosure was made.

9. Upcoming Public Disclosure.

Do you have any plans to make a public disclosure in the next 30 days?

- Yes No

If so, when and where?

10. Funding for Invention.

Has the research that led to the invention been sponsored or funded by industry, or funded by a grant(s) from a government agency or private foundation?

- Yes No

If **Yes**, please provide TTO with information on **all** funding sources for research that resulted in this invention.

| Sponsor Information (e.g. Gov't Agency, Company, Foundation) | Grant or Contract # | UMA Kualo # |
|--|---------------------|-------------|
| | | |
| | | |
| | | |
| | | |

PLEASE NOTE: UNDER THE BAYH-DOLE ACT, WE ARE REQUIRED TO REPORT ALL INVENTIONS THAT HAVE BEEN FEDERALLY FUNDED TO THOSE FUNDING AGENCIES. THIS INFORMATION IS VERY IMPORTANT AND CAN AFFECT FUTURE FUNDING.

11. Third-party Materials or Confidential Information.

In this research did you use any materials or confidential information provided by another institution or company?

Yes No

If **Yes**, if a Material Transfer Agreement (MTA) or a Non-Disclosure Agreement (NDA) was used in connection with these materials, please state the name of the provider, their institutional affiliation, and attach a copy of the MTA or NDA if you have it.

12. Continuing Research.

Please describe your planned future research efforts, if any, and describe any funding you have or will receive that will allow you to pursue such efforts.

If you do not currently have funding, are you actively seeking it?

Yes No

If **No**, please describe.

13. Point of Contact.

Who should be our primary point of contact for discussing the invention?

14. Additional Information.

Is there anything else you think we should know?

| |
|--|
| |
|--|

15. Inventors' Signatures.

Please sign below, to indicate (i) you are the original inventors, (ii) you will help us in the patenting and marketing processes, and (iii) you will sign documents that require your signatures.

| | Name | Signature | Date |
|----|------|-----------|------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |