

PROPRIETARY INFORMATION

UC SAN DIEGO OFFICE OF INNOVATION AND COMMERCIALIZATION INVENTION AND TECHNOLOGY DISCLOSURE FORM

Please attach additional sheets as necessary.

A. TITLE OF INVENTION

Create a short title describing the general nature of the invention without revealing the specific details that would enable others to reproduce the invention (e.g., new anticancer compound, method for chip fabrication, etc.). Please limit the title to 60 characters.

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B. 1. UCSD INVENTOR(S)

List all UCSD employees or students who **intellectually** contributed to the invention. Please also indicate any joint or special appointment with non-UCSD institutions (e.g., VA and HHMI) in the "Position" box.

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|--------------------------------------|--|---|
| Name: | UCSD Employee #: Citizenship: | Position: Joint or Non-UCSD Affiliation: <input type="radio"/> VA <input type="radio"/> HHMI Other: _____ |
| School or Division: Dept. or ORU: | Work Address: UCSD (or VA) Mail Code: | |
| Work. Phone: | Work. Fax: | Email: |
| Home Address: | | Home Phone: Home Email: |

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|--------------------------------------|--|---|
| Name: | UCSD Employee #: Citizenship: | Position: Joint or Non-UCSD Affiliation: <input type="radio"/> VA <input type="radio"/> HHMI Other: _____ |
| School or Division: Dept. or ORU: | Work Address: UCSD (or VA) Mail Code: | |
| Work. Phone: | Work. Fax: | Email: |
| Home Address: | | Home Phone: Home Email: |

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|--------------------------------------|--|---|
| Name: | UCSD Employee #: Citizenship: | Position: Joint or Non-UCSD Affiliation: <input type="radio"/> VA <input type="radio"/> HHMI Other: _____ |
| School or Division: Dept. or ORU: | Work Address: UCSD (or VA) Mail Code: | |
| Work. Phone: | Work. Fax: | Email: |
| Home Address: | | Home Phone: Home Email: |

B. 2. INVENTORS NOT AFFILIATED WITH UCSD

If an inventor is not a UCSD employee or student, please provide information below.

| | | |
|---|----------------------|-------------------------------|
| Name: | Position: | Nature of employment:: |
| Employer: | Work Address: | |
| Work Phone: | Work Fax: | Email: |
| Nature of Contribution (please provide information explaining why this person is a co-inventor): | | |

| | | |
|---|----------------------|-------------------------------|
| Name: | Position: | Nature of employment:: |
| Employer: | Work Address: | |
| Work Phone: | Work Fax: | Email: |
| Nature of Contribution (please provide information explaining why this person is a co-inventor): | | |

C. FUNDING SOURCES FOR THE PROJECT UNDER WHICH THE INVENTION WAS MADE

As funding often carries obligations to a sponsor, be sure to include all outside agencies, organizations, or companies that provided any funding to any inventor for the research that led to the conception or first actual reduction to practice of the invention. Please include any companies that have supplied materials in exchange for intellectual property rights.

| SPONSOR(S) | GRANT NUMBER | PRINCIPAL INVESTIGATOR |
|------------|--------------|------------------------|
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Is there any other corporate relationship that we should be aware of concerning this invention? **Yes** **No**

Name of Company: _____

Please explain the nature of the relationship: _____

Are you a consultant to the company listed? **Yes** **No**

D. MATERIAL TRANSFER AGREEMENT (MTA)

Please list and attach copies, if available, of any Material Transfer Agreement or any other written or oral agreement used to obtain any material used for this invention.

H. ABOUT THE INVENTION

Please write a summary of the invention following the numbered guidelines listed below. Since this information will be used to determine patentability, commercial uses, and potential licensees of the invention, please provide as many details as possible. If you have a written manuscript descriptive of your invention, please also attach a copy to this form.

1. What exactly does your invention do?

2. What is unique, novel, or better about your invention as compared to existing art?

3. What is the existing art to which you are comparing?

4. Describe how your invention works (or may work). Please include drawings, schematics, figures, etc., necessary to explain how the invention works or may work.

5. Describe the stage of development of the invention (e.g., concept stage, experimental data stage, computer model simulation stage, working prototype stage, etc.). Please include data, photographs, etc., indicating the stages of development.

6. What are potential commercial applications of your invention?

I. COMPANIES

Based on your knowledge, please provide the names and addresses of companies that are, or may be, interested in manufacturing, using, and/or further developing your invention.

| Company & Contact Name | Company Address |
|------------------------|-----------------|
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J. Please list or attach any literature references that most closely describe the state of the related art before your invention. If possible, please consider doing a search of the literature, because it will help in the evaluation of your invention.

K. If a company is interested in licensing your invention, would you be interested in assisting or working with the company to develop your invention into a product under a sponsored or research agreement with the University? Yes No