

# COLORADO STATE UNIVERSITY DISCLOSURE OF INVENTION

File #: CSU- \_\_\_\_\_

Date of Disclosure: \_\_\_\_\_

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<b>Title:</b>	

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First	Last	Cont.	(Room Number)	Phone	Fax

Main  
Contact

<b>None/Some/All (circle one) students working on this project received some form of payment from CSU. For each such student please provide the information below:</b>		
Student Name	Type of Payment (GRA, GTA, Other)	Period during which payments received.

Stage of Development	Date	Location	Persons, Records or Supporting Facts
A. First Disclosure to Others			
B. First sketch or drawing			
C. First Written Records			
D. First device or prototype			
E. First successful operational test			

**List notebook entries, reports, manuscripts (published, in press, or planned submission date), drawings etc that you feel are relevant**

**If this invention involves materials transferred to you under a Materials Transfer Agreement (MTA), please provide a copy of the MTA.**

**If disclosed outside the University or CSURF, identify individuals and or agencies and date of disclosure (In the case of biological materials please provide any dates and accession numbers for deposit to GenBank, ATCC etc.**

**If known, please list any companies that may be interested in commercializing the invention**

**Brief Summary of Invention (paper(s), more complete descriptions, etc., should be appended, but please also give a brief summary):**

**Practical and Commercial Applications:**

**Advantages over State-of-the-Art:**

**Please list below all sources of funding for materials, equipment and/or salaries of all personnel involved in making the invention (check where appropriate):**

**1. \_\_\_\_ Some / all (circle one) funds from unrestricted University/Departmental budget.**

**2. \_\_\_\_ Some / all (circle one) funds from federal or non-profit granting agencies:**

Agency	Grant or Contract #	CSU Acct #

**3. \_\_\_\_ Some / all (circle one) funds from companies or other organizations**

Company/Organization	Grant or Contract #	CSU Acct #

The undersigned hereby declare(s) that they (he/she) are (is) the true and only originator(s) of the invention disclosed herein at Colorado State University, and that the invention arose in the course of work at or on behalf of Colorado State University and will be handled according to University Policy (Section J of the Academic Faculty and Administrative Professional Manual).

The following information regarding home addresses and Social Security Numbers is required.

<p><b>MAIN CONTACT</b></p> <p>Inventor 1: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>	<p>Inventor 2: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>
<p>Inventor 3: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>	<p>Inventor 4: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>
<p>Inventor 5: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>	<p>Inventor 6: _____</p> <p>Sign: _____</p> <p>e-mail : _____</p> <p>Citizenship: _____</p> <p>Home Add: _____</p> <p>_____</p> <p>_____</p>

If you choose to perform your own patent searches, you can access patent databases at the following web sites:

IBM Intellectual Property Network: <http://www.patents.ibm.com/> ,  
 U.S. Patent & Trademark Office: <http://www.uspto.gov/>

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