



Office of Research & Creative Activity
Innovation Disclosure Form
Confidential

Background

In compliance with WKU's Policy on Intellectual Property (2.8102) and the requirements of federal sponsoring agencies, University students, staff and faculty are required to submit intellectual property disclosures to the Office of Research & Creative Activity. A completed innovation disclosure form serves as the basis for an assessment of the intellectual property, determination of the commercialization potential, and selection of an appropriate protection option. If you need any assistance in completing this form, please contact

intellectualproperty@wku.edu

Description

1. Title of innovation:
2. What problem did you set out to solve?
3. What is new/novel about your innovation?
4. How is your innovation a better solution than what is currently available in commercial products?
5. Describe any experimental work suggesting that your innovation is a solution to that problem. Identify specific test data, models, or products created.
6. Are there limitations to your innovation? Are you continuing experiments to overcome these limitations?
7. Is your innovation fully developed, or are additional resources required for commercial or public use?
8. Please attach any additional materials to explain your innovation, such as manuscripts, photos or drawings.

Innovation Record

1. Date of the initial idea for the innovation:
2. Date of first demonstration of the innovation:
3. Did you describe the first demonstration of the innovation in a lab notebook or other record?
4. If yes, please provide a list of dated documentation about the invention, such as notebook pages or other written correspondence.

Disclosure Record

1. Have you disclosed the innovation in an abstract, manuscript, conference document, presentation, news story, thesis, or conversation?

If yes, please provide:

The date:

Form/format of disclosure:

Please attach a copy of disclosure or details of disclosure.

2. Do you plan to have a publication or other disclosure in the next 6 months?

If yes, please provide:

The predicted date:

Form/format of disclosure:

Please attach a copy of drafts, preprints, etc.

3. Have you disclosed your innovation to industry representatives?

If yes, please provide:

The name of the company:

The company representative(s):

Name:

Email:

Phone number:

4. Has there been any sale, offer of sale, commercial testing or public use of the innovation?

If yes, please provide:

The date of the sale:

Form/format of disclosure:

Please attach a copy of the details.

Sponsorship / Funding

1. Was the research that led to the innovation sponsored?

If yes, please provide:

Sponsor Name:

Sponsor/Agency ID#:

Grant #:

Commercialization

1. Who or what companies are active in the same space as your innovation?
2. If anyone has expressed interest in your innovation for its commercial potential, please provide the name of entity and information on any proposed licensing terms.
3. Please provide any information that may be valuable in realizing the full commercial potential of the innovation such as applications, promotion, marketing or distribution.
4. If the innovators have any financial interest in the proposed licensee organization (including investment, income, or as position as owner, director, officer, trustee, or employee), please describe in detail the economic interest.

Key Contact

1. Who should our office contact for routine communications?

Name:

Email:

Phone:

Innovator(s) and Signature(s)

The signature lines below must be signed. The date of the last signature is the date when this disclosure comes into effect.

List the names and titles of all inventors/innovators and identify their % contribution. The contribution of all inventors/innovators should total 100%. The Lead Inventor/Innovator contributes the highest %.

Name:

% Contribution:

Title:

Department:

College/School:

University (if other than WKU):

Home Address:

Email Address:

Citizenship:

If not US Citizen, please provide Alien registration number and expiration date:

Registration number:

Expiration Date:

Signature: _____ Date: _____

Name: _____ % Contribution: _____

Title: _____

Department: _____

College/School: _____

University (if other than WKU): _____

Home Address: _____

Email Address: _____

Citizenship: _____

If not US Citizen, please provide Alien registration number and expiration date:

Registration number: _____

Expiration Date: _____

Signature: _____ Date: _____

Name: _____ % Contribution: _____

Title: _____

Department: _____

College/School: _____

University (if other than WKU): _____

Home Address: _____

Email Address: _____

Citizenship: _____

If not US Citizen, please provide Alien registration number and expiration date:

Registration number: _____

Expiration Date: _____

Signature: _____ Date: _____

If there are additional contributors, please provide that as an attachment.

The completed form and supporting documentation should be submitted to the
Intellectual Property Committee, 301 Wetherby Administration Building

Office of Research & Creative Activity, WKU
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