# CONFIDENTIAL INVENTION DISCLOSURE FORM (IDF)

1. **Title.** Title of the invention: _____

2. **Detailed Description.** *Attach* a detailed description of the invention, which for example can include what is captured in a draft manuscript, draft poster or grant proposal if these are available, giving evidence that the invention has been reduced to practice and/or to allow for us to understand your invention.
   a. If this invention is associated with another invention disclosure form submitted previously, please list the prior invention number:_____

**3. Funding & Resources**

| |
|---|
| Was this invention developed with the use of any research grant/contract funds? YES ◯ NO ◯ |
| If yes please list any relevant contract information, including the agency/entity that sponsored the work and any grant numbers. This includes any funding from UCRI. Please note that accurate and complete sponsorship information is necessary to fulfill UC obligations to the NIH and other funding bodies under their research contracts reporting requirements. |
| Grant Info: |
| Was there significant use of UC administered funds or facilities? YES ◯ NO ◯ |

4. **Prior Disclosures**
   *Accurate answers to the following questions are essential, as prior disclosure may affect the possibility of obtaining patent rights*

   a. Have you disclosed the subject matter orally, in written form or in any electronic format to anyone outside of UC who is not a collaborator? YES ◯ NO ◯
      A. If YES, to whom? _____
      B. If YES, when & where? _____
      C. If YES, was it: Orally ☐ In Writing ☐ Electronically ☐
         1. If disclosed in writing or electronically, please *attach* a copy of each such tangible disclosure.

   b. Was a Material Transfer Agreement, Confidentiality Agreement (e.g., CDA, NDA, PIA) or other agreement, involved either in acquiring materials or information used in your research or completed prior to sharing materials or information from your research? YES ◯ NO ◯

   c. Do you have any planned disclosures upcoming, such as submission of an abstract, a poster presentation, journal publication, and/or conference presentation? YES ◯ NO ◯
      A. If YES, when & where? _____

## 5. UC Inventor(s)

*Please list all individuals who made a direct contribution to creation of the invention's conception and who are/were employed by UC at the time of the invention must be listed.*

By signing below, we acknowledge the University of Cincinnati's Policy on Inventions and Discoveries, which requires the university to share with inventors any royalty income derived from their inventions. Further in accordance with the policy, we hereby assign all of our right, title, and interest in this invention to the university; we agree to execute all documents as requested to perfect this assignment; we agree to cooperate with the university in the protection of this invention; and we hereby authorize the university to file, in its own name, applications for patent in foreign countries in connection with this invention and to secure, in its own name, the patents issued thereon.

| | | | |
|---|---|---|---|
| Full Name | | Full Name | |
| M# | | M# | |
| Home Address | | Home Address | |
| Phone | | Phone | |
| Email | | Email | |
| Position | | Position | |
| College & Dept. | | College & Dept. | |
| Country of Citizenship | | Country of Citizenship | |
| % Contribution | | % Contribution | |
| X | | X | |
| Inventor's Signature | Date | Inventor's Signature | Date |

| | | | |
|---|---|---|---|
| Full Name | | Full Name | |
| M# | | M# | |
| Home Address | | Home Address | |
| Phone | | Phone | |
| Email | | Email | |
| Position | | Position | |
| College & Dept. | | College & Dept. | |
| Country of Citizenship | | Country of Citizenship | |
| % Contribution | | % Contribution | |
| X | | X | |
| Inventor's Signature | Date | Inventor's Signature | Date |

Are there additional UC Inventors? YES ◯ NO ◯

If Yes, please *attach* a list of the additional UC inventors.

## 6. Other Inventor(s) not associated with UC.

*Include all individuals who made a direct contribution to creation of the invention's conception who were not employed by UC at the time of the invention.*

| | | | |
|---|---|---|---|
| Full Name | | Full Name | |
| Home Address | | Home Address | |
| Phone | | Phone | |
| Email | | Email | |
| Position | | Position | |
| Employer | | Employer | |
| Country of Citizenship | | Country of Citizenship | |
| % Contribution | | % Contribution | |
| | | | |
| Full Name | | Full Name | |
| Home Address | | Home Address | |
| Phone | | Phone | |
| Email | | Email | |
| Position | | Position | |
| Employer | | Employer | |
| Country of Citizenship | | Country of Citizenship | |
| % Contribution | | % Contribution | |

For each individual listed above please attempt to provide a contact person from their university and/or organization that we can contact to discuss the invention, typically this is in your collaborator's tech transfer office.

| | |
|---|---|
| Name | |
| Phone | |
| Email | |
| Organization/University | |
| Name | |
| Phone | |
| Email | |
| Organization/University | |