Please submit the completed WORD DOCUMENT to:

**PHYSICAL SCIENCES** [Sandra.Jaggernauth@ucf.edu](mailto:Sandra.Jaggernauth@ucf.edu) | **LIFE SCIENCES** [Amanda.Reno@ucf.edu](mailto:Amanda.Reno@ucf.edu)

*With the exception of the signature pages, please do not submit this document as a PDF. Only submit Word Documents.*

1. **TITLE OF INVENTION** *(briefly comprehensive, technically accurate, and descriptive):*

1. **INVENTOR INFORMATION**
   1. **UCF Lead Inventor:**

Full name (*Last, first*):

Department Affiliation:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

* 1. **Additional UCF Inventor(s) Information:**

Full name (*Last, first*):

Department Affiliation:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

Full name (*Last, first*):

Department Affiliation:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

Full name (*Last, first*):

Department Affiliation:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

* 1. **Non-UCF Inventor(s) (if any):**

Full name (*Last, first*):

Company Name:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

Full name (*Last, first*):

Company Name:

Title:

Nationality:

Country of Residence:

Work Address:

Home Address:

Phone Number:

Email:

*\*If there are additional inventors, please let us know.*

1. **ABSTRACT OF THE INVENTION (NON-ENABLING):**

*This will be used in our campaign to promote the invention, and should, therefore, be no longer than a typewritten page. Unlike the invention’s concise description,* ***the abstract should not include any confidential or proprietary information.***

1. **FINANCIAL SUPPORT/CONTRACT IDENTIFICATION (VERY IMPORTANT):**

*Identify the specific grant, UCF project number, and the external sponsors (governmental agencies, industrial sponsors, private agencies, or others) which provided support used to defray the costs related to the research from which the invention resulted. This information is needed to determine whether this invention is subject to the terms of sponsorship. (e.g. UCF Project #XXXXXXXX; NIH Award #R01XX055555).*

1. **LIST ANY AND ALL EXISTING AGREEMENTS REGARDING THIS TECHNOLOGY:**

*Examples of such being research agreements, confidential disclosure agreements, consulting agreements, material transfer agreements, visiting scientist’s agreements or other agreements which are in place.*

1. **PUBLIC DISCLOSURE / PUBLICATION PAST OCCURRENCES AND FUTURE PLANS:**

*Public disclosure involves abstracts, and presentations at scientific meetings (including poster sessions), public seminars, shelving of thesis, publications, disclosure to others outside the University who have not signed a confidentiality agreement, and use, sale, or offer of sale of the invention. Identify dates and circumstances of any such disclosures. Also, indicate your future disclosure or publication plans, and notify the Office of Technology Transfer if the invention becomes publicly disclosed or published (whether by plan or inadvertently).*

1. **CONCISE DESCRIPTION OF THE INVENTION:**

*Your disclosure should enable someone having knowledge of the field to understand the invention. Include all essential elements (features, concepts, or new results of the invention, whichever is most applicable), their relationship to one another, and their mode of operation. Identify the elements which are considered novel. Also, if the invention is an apparatus or system, attach drawings or a sketch, and indicate if it has ever been built or tested. Use additional pages if necessary; attaching drawings, manuscripts, papers, or other supporting material to facilitate understanding of the invention.*

1. **DATE AND PLACE WHERE DISCOVERY WAS MADE:**
2. **NAMES AND ADDRESSES OF PERSONS FAMILIAR WITH YOUR WORK ON THIS INVENTION:**

1. **INVENTION’S BACKGROUND:**

*In order for patent counsel to determine the patentability of this invention, it will be necessary to compare it to existing technology (referred to as ‘’prior art’’). This section should provide information to aid in this evaluation.*

* 1. **List any published materials (e.g. patents, commercial literature or scientific articles) relating to the invention.**
  2. **Identify the advantages or benefits of the invention over currently available technology, such as efficiency, cost benefit, simplicity or overcoming a defeat.**
  3. **Identify any possible uses for this invention.**
  4. **List the deficiencies in the prior art which your invention improves upon, or the limitation which it extends.**

1. **COMMERCIALIZATION:**
   1. **Commercial use of the invention (What do you see as the commercial use of your invention? How could a potential licensee utilize the invention?):**
   2. **Potential licensees (What firms/companies do you think may be, or are, interested in the invention and why?):**
   3. **Commercial/manufacturing parameters (e.g. quantities and sales price range), if available:**
2. **Greatest impediments to the adoption of your invention:**
3. **PROTOTYPE INFORMATION:**
   1. **Is there a prototype? Yes / No (If not, how much will it cost to build one?)**
   2. **Is further development work needed?** Yes / No
   3. **Is development now in progress?** Yes / No **Scheduled?**
   4. **Dependent on commercial or federal sponsorship?**

**CERTIFICATIONS**

I (we), undersigned hereby disclose to the Patent Committee of the University of Central Florida and invention, which I (we) believe to be patentable and of which I (we) certify that I am (we are) the sole inventors.

I (we) request that the Patent Committee determine whether the University of Central Florida wishes to join in the development and exploitation of this invention.

I (we) authorize the Patent Committee to consult the opinion of professional research agencies, patent attorneys, and/or experts in the area with which this invention is concerned in order to determine its feasibility and patentability.

I (we) further certify that this disclosure is made in good faith and of my (our) free will, and all statements made herein are true and correct to the best of my (our) knowledge and belief.

Signatures of all parties claiming inventorship of and/or rights to this invention (minors require counter signature by parent or legal guardian):

**SIGNATURES OF INVENTOR(S)**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Type Name Here**

**WITNESSES**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Type Name Here**

**Date** **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Type Name Here**

**SUPPORTING SIGNATURES**

**Supervisor(s) of Inventor(s)**

**Date       Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type Name Here**

**Date       Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type Name Here**

**CHAIR OF INTELLECTUAL PROPERTY COMMITTEE**

**Date       Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type Name Here**

**ASSOCIATE VICE PRESIDENT FOR RESEARCH & COMMERCIALIZATION**

**Date       Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type Name Here**