|  |
| --- |
| Official Use OnlyUHID:       |

**Intellectual Property Disclosure Form**

 **INSTRUCTIONS**

The purpose of this form is to notify the Office of Technology Transfer and Innovation (OTTI) of your intellectual property in compliance with the [UH System Board of Regents Policy on Intellectual Property 21.08](https://uhsystem.edu/board-of-regents/policies/#BOR%20Policies%20Section%20III) and capture relevant information regarding the IP, sponsorship, publication history, and commercial partners. Where appropriate, OTTI endeavors to license UH inventions to industry for further development and commercialization. Please complete this form and send a signed copy to **oipm@central.uh.edu**. For questions please, contact OTTI at 713-743-9155 or by e-mail.

1. **Title of Intellectual Property:**

2. **Brief Description of Intellectual Property:**

3. **Type of Intellectual Property (check all that apply):**

[ ]  Invention (Patent) [ ]  Copyrighted Work [ ]  Software [ ]  Know-How

[ ]  Other:

4. **Technology Category (check all that apply):**

[ ]  Advanced Materials [ ]  Agriculture [ ]  Artificial Intelligence [ ]  Biotechnology

[ ]  Chemicals [ ]  Clean Technology [ ]  Construction Materials [ ]  Diagnostics

[ ]  Digital Health [ ]  Energy Equipment & Services [ ]  Energy Storage [ ]  IoT

[ ]  Life Sciences Tools & Services [ ]  Methods/Know-How [ ]  Oil & Gas
 [ ]  Optometry/Ophthalmology [ ]  Robotics [ ]  Semiconductors [ ]  Software & Services
 [ ]  Superconductors [ ]  Technology Hardware & Equipment [ ]  Therapeutics
 [ ]  Other:

5. **Related intellectual property disclosure(s) previously submitted to UH:**

6 . **Describe what problem the technology solves:**

7**. Describe what is new and better than existing technologies:**

8. **DETAILED DESCRIPTION OF INVENTION**

 [ ]  See Below (Enter description below if checked) [ ]  See Attached

9. **SPONSORSHIP** **AND FUNDING**

 The following are a brief series of questions regarding the sponsorship or funding for the

invention described in this disclosure. Please answer the following questions as thoroughly as possible.

Federally funded? (e.g. National Institute of Health, National Science Foundation, etc.)
[ ]  Yes [ ]  No

 If yes name federal entity:       Award No.:

 If no, name entity:       Award No.:

 This disclosure has no sponsorship: [ ]

 CPRIT grant?

 [ ]  Yes [ ]  No

 If yes, list award:

 STTR or SBIR?

 [ ]  STTR [ ]  SBIR [ ]  Neither

 STTR Award No:

 SBIR Award No.:

 Is this invention funded (at least in part) by an existing licensee?
 [ ]  Yes [ ]  No

 If yes, name licensee:

 Sponsored Research Agreement?
 [ ]  Yes [ ]  No

 If yes, provide details:

 Are there inventors from another institution subjecting the invention to an inter-institutional

Agreement (IIA?)
 [ ]  Yes [ ]  No

 If yes, name institution(s):

10. **Public Disclosure**

List any past or pending/future disclosures of the intellectual property (presentations, publications, grants/proposal, on-line disclosures, discussion with colleagues/industry, etc.). Provide location and date(s).

11. **Commercial Partners**

List companies that may have or has expressed an interest in developing/commercializing the intellectual property.

12. What is the general readiness level of the technology described in the disclosure (choose the most suitable answer):

[ ]  Concept/Principle (Innovation)

[ ]  Proof of Concept

[ ]  Existing Prototype/Concept in Development

[ ]  Prototype/Concept Developed and Demonstrated

[ ]  Invention Ready for Market (Implementation)

13. List any products, publications, or patents that are closely related to the invention.

14. **INVENTOR/AUTHOR/CONTRIBUTOR:**

An **“inventor”** is any person(s) who contributes in whole or in part to the conception of the invention, not one that contributes solely to the reduction of the invention to practice. Conception is the formation in the mind of the inventor(s) a definite and permanent idea of the complete and operable invention, as it is to be applied in practice.

An **“author”** is any person(s) who contributed in whole or in part to a copyrighted work by expression of the idea in a tangible medium.

A **“contributor”** is any person(s), who is not an inventor or an author, but is recognized by the inventors or authors as having made a contribution to the IP, and who is to share in any and all future revenues, including equity and any other sources, from commercialization of the intellectual property in the proportions set forth in the percentage of contribution as if they were an inventor or author.

 **This section is for UH Inventor/Author/Contributors**

|  |
| --- |
| **I hereby declare that all statements made herein to my own knowledge are true. I hereby assign all right, title and interest of this intellectual property to the University of Houston and agree to execute all documents as requested, assigning to UH the rights of all patent applications filed on this invention, to cooperate with the Office of Technology Transfer and Innovation in the protection of this invention, and comply with UH’s Intellectual Property policy.**  |
| **Individual 1.** Primary Investigator (PI for purposes of the disclosure only).Is PI also an inventor/author? [ ]  Yes ☐ No |
| Name | Title | % Contribution |
| College: | Department and/or Center: | Campus: |
| Description of contribution:  |
| Home Address | Permanent Address (if different than Home) |
| Employee ID #: | Country of Citizenship: | Telephone: |
| Work Email: | Personal Email: |
| Percent of UH Employment:  | Percent of Non-UH Employment:  |
| Signature: | Date: |
| **Individual 2.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | % Contribution |
| College:      | Department and/or Center:      | Campus:      |
| Description of contribution:  |
| University Address | Home Address | Permanent Address (if different than Home) |
| Employee ID #: | Citizenship: | Telephone: |
| Work Email: | Personal Email: |
| Percent time employed at UH: | Percent of Non-UH Employment: |
| Signature: | Date: |
| **Individual 3.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | % Contribution |
| College:      | Department and/or Center:      | Campus:      |
| Description of contribution:  |
| University Address | Home Address | Permanent Address (if different than Home) |
| Employee ID #: | Citizenship: | Telephone: |
| Work Email: | Personal Email: |
| Percent time employed at UH: | Percent of Non-UH Employment: |
| Signature: | Date: |

|  |
| --- |
| **Individual 4.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | % Contribution |
| College:      | Department and/or Center:      | Campus:      |
| Description of contribution:  |
| University Address | Home Address | Permanent Address (if different than Home) |
| Employee ID #: | Citizenship: | Telephone: |
| Work Email: | Personal Email: |
| Percent time employed at UH: | Percent of Non-UH Employment: |
| Signature: | Date: |

 *(Add more Individual blocks if needed)*

**This section is for Non-UH Inventors/Authors/Contributors**

|  |
| --- |
| **I hereby declare that all statements made herein to my own knowledge are true.** |
| **Individual 1.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | % Contribution |
| Description of contribution:  |
| Work Address | Home Address | Citizenship: |
| Telephone: |
| Work Email: | Personal Email: |
| Name, Telephone, and e-mail of Intellectual Property Contact Person at Institution | I may be obligated to assign rights to (company/institution) |
| Signature: | Date: |
| **Individual 2.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | % Contribution |
| Description of contribution:  |
| Work Address | Home Address | Citizenship: |
| Telephone: |
| Work Email: | Personal Email: |
| Name, Telephone, and e-mail of Intellectual Property Contact Person at Institution | I may be obligated to assign rights to (company/institution) |
|  |  |
| Signature: | Date: |
| **Individual 3.** [ ]  Inventor/Author or [ ]  Contributor  |
| Name | Title | Percent Contribution |
| College:      | Department and/or Center:      | Campus:      |
| Signature: | Date: |
| Description of contribution:  |
| Work Address | Home Address | Citizenship: |
| Telephone: |
| Work Email: | Personal Email: |
| Name, Telephone, and e-mail of Intellectual Property Contact Person at Institution | I may be obligated to assign rights to (company/institution) |

 *(Add more Individual blocks if needed)*