Office of Technology Transfer and Intellectual Property Development Tulane University

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INVENTION DISCLOSURE FORM

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The following information is necessary for the Office of Technology Transfer and Intellectual Property Development to make a proper analysis of the commercial potential of your new invention. Please be very specific in your answers and enclose photographs, drawings, or other pertinent data. Return completed form to the Office of Technology Transfer and Intellectual Property Development by mail or in person in Suite 1400 in the Tidewater Building (1440 Canal Street).

All information is strictly confidential.

DATE:		
Name and Title of All Team Members:	Department:	
Primary Contact:	 Tal·	
Primary Contact:	Tel:	
Ξ-mail:	Office Location:	
ΓΙΤLE OF INVENTION:		
TITLE OF INVENTION.		
1. Summary of the Invention:		
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2. Discuss possible uses and commercial applications of this invention:
3. Why is this invention novel or unusual compared to present technology? What are the advantages over present technology (cheaper, faster, more efficient, breakthrough)?
4. What are the disadvantages of this invention? (costly to implement, difficult to manufacture, small market)?
5. Is there a prototype or demonstration of this invention? YES
Please describe: 6. Is any experimental data available? YES NO Please describe:
I loade describe.

7. Have you ever seen or read about a similar invention? YES NO			
If YES, then provide: a) Name & date of publication/presentation			
b) Explanation of why this invention is different or better			
8. Has this invention been published or otherwise disclosed in either written or oral form? YES NO			
If yes, when and in what forum or journal? (Please send us a copy of the article or a description of the oral or poster presentation)			
9. Are there any plans to publish or otherwise disclose this invention in either written or oral form? YES NO			
If so, when and in what forum or journal?			
10. Has this invention been disclosed to industry representatives? YES NO If yes, complete the following:			
Date of disclosure			
• Company			
• Contact/title			
• Phone			

11. List any other firms or industries that may have a commercial interest:
12. Has the work been sponsored under a grant or contract? YES NO
If so, please attach a copy of the agreement or contract and complete the following:
Sponsoring organization(s):
\
Contract or grant number:
13. Were any biological, chemical, or physical materials that contributed to this invention obtained from other investigators or from industry? YES NO
obtained from other investigators of from findustry: TES 140
If YES, was a material transfer agreement signed? YES NO Please attach any such agreement.
Ownership of intellectual property is governed by the Tulane Intellectual Property Policy

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PLEASE NOTE: SIGNATURE OF TEAM MEMBERS REQUIRED ON NEXT PAGE

SIGNATURES OF ALL TEAM MEMBERS:

I have	have not	executed the Tulane Universit	y Employee Inventions and
Proprietary	Information Agre	eement.	
I do Administra	do not tion, either with o	have an appointment/affiliation without compensation.	on with the Veterans
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Name		Signature	Date

If more than two team members, please print additional copies of this page.