



## INVENTION DISCLOSURE FORM

By completing and submitting this form to OVCRD you will assist our office in having a record of the date of conception of the invention and provide relevant information that would enable our office to evaluate, protect and commercialize your invention. OVCRD may arrange a meeting with you to discuss your invention and clarify items contained in the IDF and the documents that you submitted. Thereafter, OVCRD will convene a committee that will assess the patentability and commercial viability of your invention.

OVCRD and its present, past and future staff, are hereby bound to confidentiality regarding any information disclosed herein. OVCRD shall undertake to have confidentiality agreements executed by any other party to whom the OVCRD may give the information contained in this disclosure, for purposes of invention evaluation and patent application.

“Invention evaluation” shall be understood to comprise the steps taken by the OVCRD to assess the patentability and marketability of the invention. “Patent application” shall include all processes related to the filing of a patent application, such as but not limited to prior art searches and patent drafting.

If you have questions regarding the policies and procedures of the University on intellectual property rights or if you would like assistance in filling out the form or learning how to do prior art search please call OVCRD at tel. nos. 981-8763; 927-2568; or e-mail [\*\*ipr.ovcrd@gmail.com\*\*](mailto:ipr.ovcrd@gmail.com).

Kindly return the original Invention Disclosure Form together with supporting documents to:

TECHNOLOGY TRANSFER OFFICE  
Office of the Vice Chancellor for Research and Development  
Lower Ground Floor PhiVolcs Bldg., C.P. Garcia Ave.,  
UP Diliman, Quezon City

Thank you.



OFFICE OF THE VICE CHANCELLOR FOR RESEARCH AND DEVELOPMENT  
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*Please do not fill out this part: (For OVCRD only)*

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*OVCRD Docket Number:* \_\_\_\_\_ *Case Officer:* \_\_\_\_\_

**1. TITLE OF INVENTION**

The title should describe what the invention does, but not how it is made or how it works. Please provide also a short name for your invention.

**2. SEARCH TERMS** (up to 10)

Please provide a short list of words, synonyms, common industry phrases, and/or categories directly related to your invention so that our office will be able to assist you in conducting a prior art search. We encourage you to learn how to do a preliminary patent search. We suggest you refer to the following on-line materials:

1. USPTO Patent and Trademark Depository Library Tutorial at <http://www.uspto.gov/web/offices/ac/ido/ptdl/CBT/>
2. <http://www.stanford.edu/group/biodesign/patentsearch/>
3. <http://www.lib.utexas.edu/engin/patent-tutorial/tutorial/pattut.html>

If you would like further assistance kindly get in touch with our office.

**3. BRIEF OVERVIEW OF THE INVENTION** (3-4 paragraphs)

a) Provide a short, general layperson's description of the invention

b) What is the purpose of the invention? What problem does it solve?

c) How does it work?



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d) Is it a new product, process, or composition of matter? Or is it a new use for or improvement of an existing product, process or composition of matter?

e) What benefits can the invention give? (Please use extra sheet/s if necessary.)

**4. TECHNICAL DESCRIPTION, DETAILS AND SUPPORTING DATA**

Provide results, data or other evidence demonstrating how the invention works. Kindly disclose the invention in a step-by-step manner sufficiently clear and complete for the invention to be replicated by a person of ordinary skill in the art; describe in detail at least one way of carrying out the invention claimed; Use examples where appropriate and with reference to the drawings, if any. (You may attach papers, pilot projects or visual material, project reports, published or unpublished, in response to this question. )



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**5. PUBLICATIONS/PRESENTATIONS/AND OTHER FORMS OF PUBLIC COMMUNICATION (DISCLOSURE)**

Please identify all past and future seminars, talks, abstracts, publications, presentations (paper/poster), web postings, and other venues used to describe the invention. These may affect the scope of patent protection and the timing of filing. [**Disclosure** is the oral, written, or electronic dissemination of the invention in a manner sufficiently clear and complete for it to be replicated by a person skilled in the art.]

Type of disclosure (i.e. publications, seminars, etc)	Date(s)

**6. PRIOR METHODS, APPARATUS, AND DEVELOPMENTS**

If you need assistance with learning how to conduct a prior art search please do not hesitate to get in touch with our office. Our office would greatly appreciate receiving documentation regarding how you conducted your search e.g. database, search terms and patent classification numbers used in order to answer the items below. Please attach said documentation to this form.

a) Existing prior art (products, processes/methods or apparatus) closest to your invention and the problems of each that the present invention solves.

b) What advantage/s does your invention have over them?



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- c) Cite previous publications and patents of other inventors (including your own) made available to the public anywhere in the world, you believe that are closely related to your present invention. Please attach all relevant publications, patents, advertisements, posters, etc., if available.

**7. STAGE OF DEVELOPMENT** (2-3 paragraphs)

Describe the development status (e.g. concept only, laboratory tested, prototype, etc.) of your invention and briefly indicate what steps are needed to bring the same to the market?

**8. POTENTIAL PARTNERS**

Identify companies or market sectors that could benefit from your invention including public or government institution or research and development institutions (RDI).



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**9. DATES OF CONCEPTION AND REDUCTION TO PRACTICE**

These dates have to be documented to respond to any challenges that may arise in the case of patents filed in the United States which follows the first to invent rule. Conception is the formulation in the mind of the inventors of the ultimate working invention. Reduction to practice can be accomplished either "actually" or "constructively". **Actual reduction to practice** is the physical creation of the invention. **Constructive reduction to practice** is a detailed written description that demonstrates the invention will work as conceived. Describe the circumstances and dates surrounding the development of your invention: (You may attach extra sheets, if needed). You may also wish to attach a copy of the relevant portions of the inventor's laboratory notebook.

	<b>Details</b>	<b>Date</b>
Conception of invention. Is this date documented in writing? If so, where?		
First reduction to practice.		

**10. SPONSORSHIP**

Identify all grants, contracts, and other sources of funds contributing to the research that led to the invention. You should list all agencies that you would acknowledge in a publication. The OVCRO will check the contractual reporting obligations associated with your funding. Please attach copies of said grants or contracts.

<b>Agency or Sponsor</b>	<b>Grant / Contract / Other Number</b>



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Please indicate substantial University resources that you used in connection with the research that led to the production of the invention. The term substantial University resource refers to resources that are not ordinarily available to all faculty, researchers or students. Examples of substantial university resources include University intellectual property, proprietary or confidential information, University funded time (research load credit). Examples of non-significant use of university resources include ordinary use of computers and University libraries.

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**11. OTHER AGREEMENTS AND INTERACTIONS**

Please identify any agreements or interactions that you have entered into that are related to the invention and might grant rights to a company or other party outside of the University and attach a copy of said agreements (material transfer agreements, commercially sponsored research agreements, consortia agreements, consulting agreements, etc.)

Did this invention use any materials which were obtained from a company or another institution?  
NO  YES  (Please provide details, and indicate if there is a Materials Transfer Agreement (MTA) . Please provide a copy of the MTA)

Did you transfer to any researcher outside of your institution any new Materials (DNA, peptides, cell lines, vectors, catalysts, alloys, etc) related to the invention?  
NO  YES  (Please provide details and provide a copy of the MTA, if any).

Is any other group, lab, or researcher on campus using your invention in their research program?  
NO  YES  (Please provide details and provide a copy of the MTA, if any).



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## 12. INVENTORS

List all those who helped contribute to the conception of the ultimate working invention. The people you include ultimately may or may not be legal inventors. Please place an asterisk (\*) next to the name of the inventor to whom correspondence should be sent. If any person holds an appointment or appointments with any other university, company or government agency, please indicate the same below. Please also attach a copy of any intellectual property agreement that said party may have signed in favor of the university, company or government agency or the latter's intellectual property policy if available.

Inventor: \_\_\_\_\_ Citizenship \_\_\_\_\_

Dept/Affiliation: \_\_\_\_\_ Position: \_\_\_\_\_

Office Address \_\_\_\_\_

Office Phone/Fax \_\_\_\_\_ Email address: \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Inventor: \_\_\_\_\_ Citizenship \_\_\_\_\_

Dept/Affiliation: \_\_\_\_\_ Position: \_\_\_\_\_

Office Address \_\_\_\_\_

Office Phone/Fax \_\_\_\_\_ Email address: \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

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Office Address \_\_\_\_\_

Office Phone/Fax \_\_\_\_\_ Email address: \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

(If more, please list.)





By disclosing this invention through the accomplishment and submission of this form, I/We, the inventor(s), hereby:

1. attest that the information I/we have given is true and correct to the best of our knowledge and that if necessary I/we agree to furnish additional information or documents that may be required by OVCRD;
2. agree and consent to such necessary and appropriate steps that the OVCRD may undertake in having this disclosure evaluated and in filing and prosecuting the appropriate intellectual property application/(s) and/or protecting the invention as undisclosed information or a trade secret; and
3. confirm that I/we are bound to comply with the existing intellectual and other relevant policies, guidelines and regulations of the University and shall perform all acts and sign all such documents necessary in order to comply with said policies, guidelines and regulations.

The CORRESPONDING INVENTOR should affix signature and date, along with his/her Department Head and College Dean. (Note: If that inventor is not the head of the laboratory, the signature of his/her faculty advisor or supervisor is required.)

<b>Corresponding Inventor (Printed Name)</b>	<b>Signature</b>	<b>Date</b>

<b>Department Head and College Dean</b>	<b>Signature</b>	<b>Date</b>

*Due acknowledgement is given to the Office of Technology Management of the University of Illinois at Urbana-Champaign and the Office of Technology Licensing Invention and Technology Disclosure of Stanford University from whose Invention Disclosure form this document was patterned.*