**CONFIDENTIAL INVENTION DISCLOSURE FORM**

University policy requires that compensated or non-compensated employees of the University, non-employees who use University facilities, and those who receive grant or contract funds through the University disclose all potentially patentable discoveries and inventions to the University.

For assistance, contact OTT at 808-956-0775 or [uhott@hawaii.edu](mailto:uhott@hawaii.edu).

*Note: All UH and RCUH inventors must sign this form in Section III and obtain their immediate supervisor’s signature in Section IV for OTT to begin to evaluate the discovery/invention. This includes determining ownership status, seeking legal protection and/or exploring licensing and other commercialization opportunities.*

**SECTION I. Title of Invention and Primary Contact**

1. Title of Invention:

|  |
| --- |
|  |

1. Primary Contact (who will be speaking and acting on behalf of the inventors)

|  |
| --- |
|  |

**SECTION II. Declaration of Ownership**

Check below to indicate how the discovery/invention was developed:

1. *University of Hawai‘i*: Discovery/invention was the result of research or scholarship undertaken using equipment, facilities or funds provided by the University or an outside agency, or was conceived of or developed in the course of the inventor’s duties at the University.
2. *Joint Discovery/Invention*: Discovery/invention was the result of research or scholarship collaboration with another institution using equipment, facilities or funds provided by the University or an outside agency, or was conceived of or developed in the course of the inventor’s duties at the University.
3. *Personal*: Discovery/invention was the result of personal or private research performed independently of any contractual obligations to the University and without using equipment, facilities or funds provided by the University or an outside agency, or the result of permissible consulting activities.

**SECTION III. Inventors, Royalty Sharing and Assignment**

List *all* potential inventors involved in the conception or reduction to practice of the invention. Inventorship is a matter of law, and each person listed may not be named as an inventor on any patent that may ultimately be issued. See OTT’s Frequently Asked Questions for more information.

1. **University and RCUH Inventors**

As indicated by their signatures below, and subject to final determination of ownership under the University’s intellectual property policies, the following individuals do hereby:

1. Assign and transfer to the University of Hawai‘i, whose address is Bachman Hall, 2444 Dole Street, Honolulu, Hawai‘i 96822, the entire right, title and interest in and to the discovery/invention described herein; and
2. Agree that the inventors’ share of the net royalties resulting from any licensing, sale, or other commercialization of this discovery/invention is to be divided among the inventors’ according to the contribution listed below, or if no contribution is listed below, the net royalties will be distributed equally among the inventors listed below; and
3. Agree that the individual whose name appears in Section I of this form will be the primary contact with OTT on behalf of all those listed below; and
4. Understand that if Box “C” in Section II is checked, this disclosure will be flagged for adjudication under the University’s policies for ownership and determination whether the discovery/invention was developed independently of the inventors’ University duties; and
5. Certify that all information provided in this disclosure is true and accurate to the best of their knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

For additional UH or RCUH inventors, please use Attachment 1. Make additional copies as needed.

**Attachment 1 – Additional UH or RCUH Inventors**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Citizenship |  | Union | UHPA  HGEA  None |
| Office Address |  |
| Permanent Address Street/City/State |  | | |
| Signature |  | Date |  |

2. **Other Institution Inventors**

As indicated by their signature below, the following individuals do hereby certify that the information provided in this disclosure is true and accurate to the best of their knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Institution |  | | |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Mailing Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Institution |  | | |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Mailing Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Institution |  | | |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Mailing Address Street/City/State |  | | |
| Signature |  | Date |  |

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| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Institution |  | | |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Mailing Address Street/City/State |  | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Contribution (%) |  |
| Institution |  | | |
| Dept/College/Unit |  | Title/Position |  |
| Email |  | Phone |  |
| Mailing Address Street/City/State |  | | |
| Signature |  | Date |  |

**SECTION IV. Notifications**

Note: The immediate supervisor of all UH and RCUH inventors must sign this Invention Disclosure Form before OTT can begin to evaluate this discovery/invention.

**Department Chair / Dean / Director**

To the best of my knowledge and understanding, the information on the development of the discovery/invention described in this Invention Disclosure Form, and the “Declaration of Ownership” in Section II above are accurate, subject to the comment(s) below.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |
| Name |  | | |
| Title |  | | |
| Dept/College/Unit |  | | |
| Notes/Comments |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |
| Name |  | | |
| Title |  | | |
| Dept/College/Unit |  | | |
| Notes/Comments |  | | |

Send completed & signed form via:

Email: [uhott@hawaii.edu](mailto:uhott@hawaii.edu)

OR

Fax: (808) 956-9150

OR

Mail: Office of Technology Transfer (OTT)

2425 Campus Road, Sinclair 10

Honolulu, HI 96822

For questions, please contact OTT at (808) 956-0775 or [uhott@hawaii.edu](mailto:uhott@hawaii.edu).

**SECTION V. – Description of Invention**

1. Provide a complete description of the discovery/invention, including how it is made, used & potential applications. The description should be detailed enough to enable a person skilled in the field to make & use the discovery/invention. Feel free to attach papers, presentations, drawings, etc.

|  |
| --- |
|  |

1. When and where did you first conceive of the discovery/invention?

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Place |  |

1. Is a laboratory notebook or other documentation available?  Yes  No

If no, what other proofs of inventorship can you provide?

|  |
| --- |
|  |

1. Current state of development:

Is there a prototype:  Yes  No

Has a product, apparatus, etc. been tested?  Yes  No

If yes, when and where did you demonstrate the discovery/invention works or could work?

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Place |  |

1. Describe why the discovery/invention is better than currently available technology. What benefits does it provide? What problems does it solve? Feel free to attach papers, presentations, abstracts, etc.

|  |
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|  |

1. List any papers, patents and other published material, including online videos you are aware of that are related or similar to the discovery/invention. Include copies or links to the material.

|  |
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|  |

1. List any companies or individuals who may be interested in the discovery/invention. Include contact information if available.

|  |
| --- |
|  |

**SECTION VI. Public Disclosures**

1. Has the discovery/invention been described or discussed in any journal, abstract, paper, oral presentation, news story, thesis, dissertation or other publically available medium?  Yes  No

|  |  |  |  |
| --- | --- | --- | --- |
| If yes, date |  | Medium (journal, conference, etc.) |  |
| Name of journal, conference, etc. | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| If yes, date |  | Medium (journal, conference, etc.) |  |
| Name of journal, conference, etc. | |  | |

Attach copies or links to the document.

1. Is a publication, submission, presentation or other public disclosure planned?  Yes  No

|  |  |  |  |
| --- | --- | --- | --- |
| If yes, date |  | Medium (journal, conference, etc.) |  |
| Name of journal, conference, etc. | |  | |

Attach copy or links to the document.

1. Has there been any past public use, sale or offer for sale of the discovery/invention?  Yes  No

|  |  |  |  |
| --- | --- | --- | --- |
| If yes, date |  | Place |  |
| Describe situation, including contact person(s), etc. | |  | |

1. Has the discovery/invention been discussed with people outside of your office/lab?  Yes  No

|  |  |  |  |
| --- | --- | --- | --- |
| If yes, date |  | Place |  |
| Describe situation, including contact person(s), etc. | |  | |

**SECTION VII – Research Funding & Support Information**

List all funding support of the research that led to this discovery/invention, include any materials supplied prior to the conception or reduction to practice of the discovery/invention. Attach additional pages as needed.

|  |  |
| --- | --- |
| Sponsor |  |
| Sponsor’s Grant/Project Number |  |
| ORS number |  |
| Principal Investigator |  |
| Grant/Contract/Project Title |  |
| Funding Period |  |

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| --- | --- |
| Sponsor |  |
| Sponsor’s Grant/Project Number |  |
| ORS number |  |
| Principal Investigator |  |
| Grant/Contract/Project Title |  |
| Funding Period |  |

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| Sponsor |  |
| Sponsor’s Grant/Project Number |  |
| ORS number |  |
| Principal Investigator |  |
| Grant/Contract/Project Title |  |
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| Sponsor |  |
| Sponsor’s Grant/Project Number |  |
| ORS number |  |
| Principal Investigator |  |
| Grant/Contract/Project Title |  |
| Funding Period |  |

|  |  |
| --- | --- |
| Material Provider/Institution |  |
| Material Provided |  |
| Providing Researcher/Contact |  |
| Grant/Project Title (if any) |  |

University support

|  |  |
| --- | --- |
| Facilities |  |
| Funding |  |
| Services |  |
| Other (release time, paid technical assistance, etc.) |  |

List any other sources of support for the discovery/invention.

|  |
| --- |
|  |