**CONFIDENTIAL TANGIBLE MATERIAL DISCLOSURE FORM**

For assistance, contact OTT by phone at 808-956-0775 or by email at [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 tangible material. 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. Name of Tangible material:

|  |
| --- |
|  |

1. Primary Contact (who will be speaking on behalf of the contributors):

|  |
| --- |
|  |

**SECTION II. Declaration of Ownership**

Check below to indicate how the tangible material was developed:

1. *University of Hawai‘i*: Tangible material 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 contributor’s duties at the University.
2. *Joint Discovery/Collaboration*: Tangible material 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 contributor’s duties at the University.
3. *Personal*: Tangible material 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. Contributors, Royalty Sharing and Assignment**

List *all* contributors involved in the creation/development of the tangible material.

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 tangible material described herein; and
2. Agree that the contributors’ share of any net royalties resulting from any licensing, sale, or other commercialization of this tangible material is to be divided among the contributors according to the contribution listed below, or if no contribution is listed below, the net royalties will be distributed equally among contributors; 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 tangible material 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 contributors, please use Attachment 1. Make additional copies as needed.

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

|  |  |  |  |
| --- | --- | --- | --- |
| 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 Contributors**

As indicated by their signatures below, the following individuals do hereby certify that all 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 |  |

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

**SECTION IV. Notifications**

Immediate supervisor of all UH and RCUH contributors must sign this Invention Disclosure Form before OTT can formally begin to evaluate this tangible material.

**Department Chair / Dean / Director**

I have received and acknowledge this tangible material disclosure. To the best of my knowledge and understanding, the information on the creation/development of the tangible material described in this Tangible Material 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 Tangible** **Material**

Type of tangible material (select one):

Antibody ([Go to page 6](#Antibody))

Protein/Peptide ([Go to page 7](#Protein))

Animal Model ([Go to page 8](#Animal))

Other Biological or Physical Tangible Material ([Go to page 9](#Other))

Provide a brief description of the tangible material. Feel free to attach papers, presentations, manuscripts, etc. to describe the tangible material.

|  |
| --- |
|  |

Tangible Material History

Date tangible material created:

|  |
| --- |
|  |

Has this date been documented?  Yes  No

If Yes, where is it documented (lab notes, article, manuscript, presentation, etc.)?

|  |
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|  |

Is the tangible material derived from other materials?  Yes  No

If Yes, how was the original material obtained (MTA, purchase, etc.)?

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**Antibody**

1. Monoclonal  Polyclonal
2. Clone

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| --- |
|  |

1. Species

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| --- |
|  |

1. Immunogen (Describe species, amino acids included, protein tags, other modifications, etc.)

|  |
| --- |
|  |

1. Hybridoma (Species immunized, myeloma parent, clone number, produced as)

|  |
| --- |
|  |

1. Antigen/Epitope recognized

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| --- |
|  |

1. Immunoglobulin isotype

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| --- |
|  |

1. Species reactivity

|  |
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|  |

1. Purification method

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1. Concentration (how measured)

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| --- |
|  |

1. Optimal concentrations for applications tested

|  |
| --- |
|  |

1. Species immunized

|  |
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|  |

1. Amount available & location of tangible material

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| --- |
|  |

1. Describe the unique advantages of this antibody

|  |
| --- |
|  |

1. How much would it cost someone else to create this antibody and/or hybridoma cell line?

|  |
| --- |
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[Continue to funding & support page](#Funding)

**Protein/Peptide**

1. Describe the protein sequence (amino acids included, protein tags, other modifications, molecular weight):

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| --- |
|  |

1. Origin/Purification method:

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| --- |
|  |

1. Purity/Form/Storage conditions

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1. Amount available & location of tangible material

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1. How much would it cost someone else to make this protein/peptide?

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[Continue to funding & support page](#Funding)

**Animal Model**

1. Name of model in standard nomenclature

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| --- |
|  |

1. Background strain(s)

|  |
| --- |
|  |

1. Targeted gene(s)

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| --- |
|  |

1. Genotype details (transgenic, targeted mutation, inducible)

|  |
| --- |
|  |

1. How was the strain produced & origin of the materials used?

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1. Describe phenotype observed.

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1. Are breeding pairs available?

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1. List any special housing requirements.

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1. Amount available & location of tangible material

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1. Describe how useful this strain is as a model of a human disease

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| --- |
|  |

1. How much would it cost for someone else to make this strain?

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| --- |
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[Continue to funding & support page](#Funding)

**Other Tangible Materials**

1. Type of tangible material:

Cell Line  Integrated Circuit Chip or Circuit Diagram

Reagent  Physical or Engineering Material

Plasmid  Datasets or Data

Chemical  Other:

1. Describe how the tangible material was created/developed.

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1. Amount available & location of tangible material

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|  |

1. Describe the unique advantages of this tangible material

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1. How much would it cost for someone else to make this tangible material

|  |
| --- |
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[Continue to funding & support page](#Funding)

**SECTION VI – Funding & Support Information**

List all funding support of the research that led to the creation/development of this tangible material and list any materials supplied by third parties that were used to create/develop the tangible material. Attach additional pages as needed.

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

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

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

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

|  |  |
| --- | --- |
| Material Provider |  |
| 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.

|  |
| --- |
|  |