# C:\Users\higginpe\Documents\artwork logos pngs et al\JMU Logos\JMU-logo-rgb-small.jpgIntellectual Property Disclosure Notification for Inventions

Invention and Intellectual Property disclosures are considered confidential information.Our mission is to promote innovation, enhance research by connecting inventors and the business community, and foster economic development through protecting and commercializing intellectual property. This disclosure form is your first step in protecting your invention.

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| Title of the invention Click or tap here to enter text.  **Check One**: Patent Disclosure Copyright Disclosure (Refers to i.e. software, written works, etc.) |

List of inventors.

Signatures declare that all statements made herein are believed to be true and attest agreement with JMU’s current Intellectual Property policy for possible future royalty distributions. Signatures are required for JMU employees and students.

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| |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose a percentage | | | Department: Choose a department | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | | |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose an item. | | | Department: Choose an item. | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | |
| |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose an item. | | | Department: Choose an item. | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | | |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose an item. | | | Department: Choose an item. | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | |
| |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose an item. | | | Department: Choose an item. | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | | |  |  | | --- | --- | | Inventor: Click or tap here to enter text. | | | Percentage of contribution: Choose an item. | | | Department: Choose an item. | | | Phone:  540-568-xxxx | Email:  @jmu.edu | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Inventor Signature Date | | |  | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | | | Supervisor Signature Date | | | | |

**Description**

Description of invention. The following is a checklist provided to help you determine if this innovation should be disclosed. You may fill in this information in the field below or include a supplemental file with:

Is this innovation a:

new process,  application,  method,  new composition of matter,  a device, or

something that will improve an existing product, process application or method)

Is the disclosure for a novel or an unusual features of the invention? Explain how the invention differs from present technology.

What problems does the invention solve?

What immediate applications, advantages and disadvantages, and/or possible uses are there for the invention? Include any additional diagrams as needed.

**Invention/innovation detail**

Click or tap here to enter text.

**Sponsorship Information**

|  |  |
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| **Was the labor that led to this work undertaken as part of a sponsored project?** | Yes  No |
| If yes, provide name and signature of Principal Investigator.  Name: Click or tap here to enter text.  Title: Click or tap here to enter text.  P.I. Signature Date   |  |  | | --- | --- | | JMU grant number or organization code: Code  Name of Sponsoring Agency or Company:  Click or tap here to enter text. | Grant or Contract Period: MM/YYYY to MM/YYYY  Sponsoring agency grant number:  Click or tap to enter grant number here | | |

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| **As far as you know, does the sponsor have any prior claims to the invention?**  If yes, please indicate the nature of these claims.  Click or tap here to enter text. | Yes  No |

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| **Were University facilities, equipment, materials, funds, information, or the time or services of University employees used in the production of the work or the development of the invention?** | Yes  No |
| If yes, please indicate the nature of these contributions.  Click or tap here to enter text.  What is the estimated value of University contributions? Click here to enter dollar value (See Help sheet for example) | |

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| **Do you expect to apply for grant(s) and/or receive external funding for future work on this invention?** | Yes  No |

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| **Do you consider this invention to be a result of your assigned duties?** | Yes  No |

**Other Pertinent Data (Attach separate documents if needed)**

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| **Has the invention been described in specific detail or in a general way in a publication?** ("Publication" includes abstracts of public presentations, news stories, etc. as well as published scientific papers.) | Yes  No |

If yes, dates and publications

Click or tap here to enter information – one line per publication

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| **Has the invention been described orally at meetings?**  If yes, provide details Click or tap here to enter text. | Yes  No |
| **Is a publication or oral disclosure descriptive of the invention planned within the next six months?**  Attach copies of any existing manuscripts, preprints, or abstracts.  If yes, please provide the date Click or tap to enter a date. | Yes  No |

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| **Has the invention been tested experimentally, evaluated or assessed?**  If yes, are experimental and assessment data or evaluation information available? Explain briefly  Click or tap here to enter text.  Has the invention been reduced to practice?  Click or tap here to enter text. | Yes  No |

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| **Are there known works (prior art) by other creators that are related to this one?**  Please describe, including information on known relevant patents, registered trademarks and copyrights, and publications (including web publications), if available.  Click or tap here to enter text. | Yes  No |

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| **Has the invention been disclosed to industry representatives?**  If yes, name companies and specific individuals and their titles  Click or tap here to enter text – one line per company/individual | Yes  No |

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| **Has any commercial interest been shown in the invention?**  If yes, name companies and specific individuals and their titles  Click or tap here to enter text – one line per company/individual | Yes  No |

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| **Do you know of firms that might be interested in the invention?**  If yes, name companies and specific individuals and their titles  Click or tap here to enter text – one line per company/individual | Yes  No |