

ENTITY NAME
INVENTION DISCLOSURE FORM
Invention Number _____

DATE: _____

PLEASE HAVE AT LEAST ONE INVENTOR AND A WITNESS (WHO IS NOT AN INVENTOR
SIGN AND DATE THE BOTTOM OF EACH OF THE FOLLOWING PAGES AND ANY PAGES
ATTACHED

It is important to provide accurate and detailed information on this form. The information will be used to evaluate your invention for possible filing as a patent application.

1. TITLE OF INVENTION: _____

2. INVENTOR(S) _____

The order of listing below is irrelevant. Only persons who actually conceived and contributed to the invention should be listed. Discuss this with your patent attorney if there is any doubt.

Full Name (First, Middle, Last):	
Home Address:	
Citizenship:	
Phone (Work):	
Fax (Work):	
E-mail:	

Full Name (First, Middle, Last):	
Home Address:	
Citizenship:	
Phone (Work):	

Signed _____ this _____ day of _____,
(signature of inventor)

Explained to and Understood By Me:

(Name)

Signed _____ this _____ day of _____,
(signature of witness)

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Fax (Work):	
E-mail:	

Full Name (First, Middle, Last):	
Home Address:	
Citizenship:	
Phone (Work):	
Fax (Work):	
E-mail:	

Full Name (First, Middle, Last):	
Home Address:	
Citizenship:	
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Fax (Work):	
E-mail:	

Full Name (First, Middle, Last):	
Home Address:	
Citizenship:	
Phone (Work):	
Fax (Work):	
E-mail:	

Signed _____ this _____ day of _____, _____
 (signature of inventor)

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 (Name)

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E-mail:	

FOR ADDITIONAL INVENTORS, INCLUDED DETAILS ON SUPPLEMENTAL SHEET
(ATTACHED)

3. Is this invention related to any other
 (i) issued patents,
 (ii) pending patent applications, or
 (iii) previously submitted invention disclosures of Entity X? If so, please give the title and inventors:

Conception/Reduction to Practice

4. Stage of development of the invention (i.e., % complete, simulations done, test if any, etc.):

5. Date the invention was conceived (attach copies of relevant documentation of proof of conception):

6. Has a prototype of the invention been constructed? If YES, indicate date of completion:

Technical Subject Matter

7. What technology/product/process does your invention relate to (be specific if you can)?

Signed _____ this _____ day of _____,
 (signature of inventor)

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8. Include several key words to describe the technology area of the invention in addition to #7 above:

Inventorship

9. Are all of the above-listed inventors still employed at ENTITY NAME? If NO, name of inventor(s) who are not:

10. Was the invention conceived or constructed in collaboration with anyone other than an ENTITY NAME employee or in performance of a project involving entities other than ENTITY NAME (e.g., government, other companies, universities or consortia)?

If YES, name of individual or entity: NO: YES:
Name of individual or entity:

11. Is the invention subject to any agreement between ENTITY NAME and a third party (e.g., a secrecy agreement, license agreement, and joint development agreement)?

If YES, please list names of third parties and copies of agreements between third parties regarding the program:

Public Disclosure/On Sale Activity

12. Has a description of your invention been (or planned to be) published outside of ENTITY NAME (e.g., newsletter, technical or trade journal, etc.):

If YES, please identify the publication and the date published:

Signed _____ this _____ day of _____,
(signature of inventor)

Explained to and Understood By Me:

(Name)

Signed _____ this _____ day of _____,
(signature of witness)

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13. Has the invention been (or planned to be) described or demonstrated to persons outside ENTITY NAME, including consultants or suppliers, who have not signed confidentiality agreements?

If YES, please describe individuals involved and date of demonstration:

14. Has your invention been used/sold or planned to be used/sold by ENTITY NAME or others?

If YES, date it was sold or will be sold:

15. Does this invention relate to technology that is or will be covered by a SIG (special interest group)/standard or specification?

If YES, name of SIG/standard/specification:

Signed _____ this _____ day of _____, _____
(signature of inventor)

Explained to and Understood By Me:

(Name)

Signed _____ this _____ day of _____, _____
(signature of witness)

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1. PLEASE READ AND FOLLOW THE DIRECTIONS ON HOW TO WRITE A DESCRIPTION OF YOUR INVENTION
2. Please attach a description of the invention to this form and include the following information:
3. SUMMARY
 - a. In 1-4 sentences, please describe the invention.
4. DETAILED DESCRIPTION
 - a. Please describe in detail what the components of the invention are and how the invention works.
5. ADVANTAGES
 - a. Please describe the advantage(s) of your invention over the current art.
6. FIGURE(S)
 - a. Please include figure(s) illustrating the invention (if applicable).
7. VALUE
 - a. Please indicate the value of your invention to ENTITY NAME (how will it be used?).
8. DIFFERENCES
 - a. Please explain how your invention is novel. If the technology itself is not new, explain what makes it different.
9. PRIOR ART
 - a. Please identify the closest or most pertinent prior art that you are aware of.
10. DETECTION
 - a. Please describe who is likely to want to use this invention or infringe the patent if one is obtained and how would infringement be detected?

Signed _____ this _____ day of _____, _____
(signature of inventor)

Explained to and Understood By Me:

(Name)

Signed _____ this _____ day of _____, _____
(signature of witness)