**INVENTION DISCLOSURE FORM**

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| Title:  ………………………………………………………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………………………………………… | |
| \*ID Docket #  ………………………………………………………………… | C-CAMP/ INSTEM/ NCBS  Date: ……………………………. |
| \*Remarks:  …………………………………………………………………………………………………………………………………………………………. | |

***\*To be filled by the Office of Technology Transfer***

*The purpose of the invention disclosure is to provide a record of the invention, and collate enough information to commence a patent filing. Essentially, it identifies the inventor(s), establishes the timelines of when the invention was made and gathers a fully enabling disclosure of the invention including the advances made over prior art. All Invention Disclosures will be held confidential until a patent application is filed or the invention is publicly disclosed, such as, by the inventor publishing the invention.*

Please indicate if you wish the Office of Technology Transfer to assist you in commercializing your invention. YES / NO

THE INVENTION

1. Title of the Invention:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Background:

*In order for patent counsel to determine the patentability of this invention, it will be necessary to compare it to existing technology (referred to as "prior art"). This section should provide information to aid in that evaluation.*

*Please identify references to the prior art by patent number or journal article identification – if you can.*

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*Patent website links:*

[*http://www.uspto.gov*](http://www.uspto.gov) ; [*http://pctgazette.wipo.int*](http://pctgazette.wipo.int); [*http://ep.espacenet.com*](http://ep.espacenet.com) *;* [*https://ipindia.gov.in/patents.htm*](https://ipindia.gov.in/patents.htm)

1. What is the deficiency in the prior art which your invention improves upon, or the limitation which it extends?

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1. Description of the Invention.

*Please describe specifically what you consider to be the invention, as distinct from the prior art. Please use additional pages, drawings, diagrams, etc., if required.*

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1. Does there exist an earlier, dated record of the invention's conception -- a sketch, report, laboratory notebook entry, or the like--which a) describes your invention, and b) can be independently corroborated? If YES, please describe that recordal.

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1. Does the invention involve a biological material/resource of Indian origin? If yes, please mention the source and geographical origin of the biological material/resource.

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1. Does the invention involve recombinant vectors or recombinant cells (owned by the inventor's laboratory)? Have the same been deposited with an International Depository Authority (under the Budapest Treaty)? If yes, please provide the name and address of the depository authority, date of deposition and accession numbers.

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1. Does the invention involve any traditional knowledge? If yes, please provide the details of the traditional knowledge used in the invention.

**Note:** "Traditional knowledge" refers to expertise, knowledge or applications that are passed on from generation to generation within a community/region. For example, traditional medicine, herbal ingredients etc.

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**INVENTORSHIP:**

*An ‘Inventor’ is someone who has contributed materially to the ‘conception’ of at least one Claim. ‘Conception’ means the"the formation in the mind of the inventor of a definite and permanent idea of the* ***complete*** *and operative invention as it is thereafter to be applied in practice.” Somebody who merely follows instructions is thus not an inventor. Unlike authorship, Inventorship is a legal threshold. Therefore, exercise care in listing out the inventors of the invention.*

*\*Inventors will normally receive equal share of the commercialization income as specified in the IP Policy. In exceptional cases the Lead inventor in consultation with other inventors may recommend a different inventor's income distribution formula to the OTT.*

|  |  |
| --- | --- |
| **Inventor 1** |  |
| Name |  |
| Position |  |
| Department |  |
| Home address  *(For future royalties)* |  |
| Telephone |  |
| E-mail |  |
| Alternate E-mail |  |
| Citizenship  *(for patent filing)* |  |
| Affiliation at the time of invention |  |
| % share of income |  |

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| --- | --- |
| **Inventor 2** |  |
| Name |  |
| Position |  |
| Department |  |
| Home address  *(For future royalties)* |  |
| Telephone |  |
| E-mail |  |
| Alternate E-mail |  |
| Citizenship  *(for patent filing)* |  |
| Affiliation at the time of invention |  |
| % share of income |  |

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| --- | --- |
| **Inventor 3** |  |
| Name |  |
| Position |  |
| Department |  |
| Home address  *(For future royalties)* |  |
| Telephone |  |
| E-mail |  |
| Alternate E-mail |  |
| Citizenship  *(for patent filing)* |  |
| Affiliation at the time of invention |  |
| % share of income |  |

|  |  |
| --- | --- |
| **Inventor 4** |  |
| Name |  |
| Position |  |
| Department |  |
| Home address  *(For future royalties)* |  |
| Telephone |  |
| E-mail |  |
| Alternate E-mail |  |
| Citizenship  *(for patent filing)* |  |
| Affiliation at the time of invention |  |
| % share of income |  |

*If there are more Inventors, please print extra copies of the above format (Inventor’s particulars), fill and append them to the IDF. Please attach copies of signed MoUs / Inter-institutional Agreements if the invention resulted from collaborative work.*

**Have you disclosed your invention before** to anyone outside your institution? YES/ NO󠇌 󠄀

If ‘Yes’, please 󠄀 state when, and detail the disclosure: Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Publication󠇌 󠇌󠇌 󠇌 Poster󠇌 󠄀󠄀 Thesis 󠄀 󠇌󠄀 Dissertation, 󠄀󠄀 Conference 󠄀󠇌 Demonstration󠄀 󠇀 󠇌󠇀 Exhibi󠄀t Other 󠄀󠄀 *Please tick 󠇌 the appropriate box and provide details.*

COMMERCIAL EVALUATION:

1. What do you see as the commercial use of your invention?

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1. At what stage of development is your invention at present?

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1. What firms do you think may be / are, interested in your invention; and why?

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1. What do you see as the greatest impediment to the adoption of your invention?

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**ENCUMBERANCES:**

FUNDING:

*This is to ensure that obligations to funding agencies or sponsors are met. Please list all grants and external funds that were used in conceiving the invention and reducing it to practice*.

|  |  |  |  |
| --- | --- | --- | --- |
| # | Funding agency/ Sponsor | Grant No. | Recipient Inventor |
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|  |  |  |  |
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**OTHER ENCUMBERANCES:**

*Has any biological material that is owned by some other party been used in creating and working the invention? Materials not owned by the inventor’s laboratory such as antibody, plasmid, vector, cell-line, chemicals or software? If yes, please fill out the following details and enclose a copy of the signed MTA(s).*

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| --- | --- | --- |
| 󠇌 Tick󠇌 󠇌 |  | **Description** |
|  | Material Transfer Agreement |  |
|  | Proprietary assay |  |
|  | Micro-assay |  |
|  | Proprietary database |  |
|  |  |  |
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**ASSIGNMENT:**

For any of the following considerations namely,

* my continuing or anticipated employment at C-CAMP / NCBS / INSTEM1;
* my performance of research at C-CAMP / NCBS / INSTEM1;
* or for the opportunities made or to be made available to me to use C-CAMP / NCBS / INSTEM1  funds, facilities or other resources,

I hereby assign to, C-CAMP / NCBS / INSTEM1 all rights to all inventions, copyrightable materials, computer software, semiconductor mask works, tangible research property, and trademarks (“Intellectual Property”) conceived, invented, reduced to practice, or authored by me, either solely or jointly with others, which

* are developed through contract or sponsored; research or
* result from significant use of funds from C-CAMP / NCBS / INSTEM1 or
* result from a work-for-hire funded by C-CAMP / NCBS / INSTEM1

I will execute all necessary papers and otherwise provide proper assistance, promptly upon C-CAMP / NCBS / INSTEM’s1  request and expense, during and subsequent to the period of my employment/ affiliation, to enable C-CAMP / NCBS / INSTEM1  to obtain, maintain, or enforce patents, copyrights or other legal protection for such Intellectual Property.

I agree that all *tangible research property* made by, compiled by, delivered to, manufactured or developed by C-CAMP / NCBS / INSTEM’s1  will at all times be the property of C-CAMP / NCBS / INSTEM’s1  and that I will return them to C-CAMP / NCBS / INSTEM’s1 when I cease to be its employee or affiliate.

This Agreement replaces all previous agreements relating in whole or in part to the same or similar matters that I may have entered into with C-CAMP / NCBS / INSTEM’s1 and may not be modified or terminated, in whole or in part, except in writing signed by an authorized representative of C-CAMP / NCBS / INSTEM1. Discharge of my undertakings in this Agreement will be an obligation of my executors, administrators, or other legal representatives or assignees.

**Furthermore, I represent that, except as identified on pages attached hereto: (a) I have not executed any agreements with or incurred any obligations to others in conflict with the foregoing; and (b) I will not, while bound by this Agreement, enter into any other agreements, or otherwise incur any obligations, that conflict with the foregoing.**

**1** *Strike out Institutions of which you are not an employee or affiliate.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # | INVENTOR | INSTITUTION | SIGNATURE | DATE |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |