

Review History: Last reviewed by the Policy Review Committee 04/28/10.

**ATTACHMENT 2
ELIZABETH CITY STATE UNIVERSITY
REPORT OF INVENTION**

1. DISCLOSING PARTY/PARTIES:* (primary contact person)

Name:

Rank/Dept.:

Campus Address:

Campus Phone:

Campus Fax:

E-Mail Address:

Home Address:

Home Phone:

***(We ask for “disclosing parties” rather than inventors because an inventor is one who contributes to the conception of an invention as that invention is subsequently defined by one or more patent claims; therefore the final determination on inventorship must wait until such time as a patent application is filed.)**

[For additional disclosing parties, please use the same format as above and attach as an addendum at the end of this report]

Pursuant to the Patent, Copyright and Intellectual Property Policies and Procedures of Elizabeth City State University, I/WE hereby disclose details about the following invention:

2. TITLE OF INVENTION:

An inventor shall not receive less than fifteen (15%) of the gross royalties derived from licensing or income from assignment or sale of each patent resulting from the invention. If the inventor seeks to receive more than 15% of the gross royalties, the inventor needs to provide in writing their request and justification for the increased amount along with the patent disclosure form, prior to a patent being issued.

Review History: Last reviewed by the Policy Review Committee 04/28/10.

CONFIDENTIAL

Page 2 of 3

3. **DATE OF INVENTION: [Indicate actual or approximate dates.]**

Earliest conception*

Experimentation Period

Reduction to Practice

4. **DESCRIPTION OF INVENTION:**

1. Classify invention as one or more the following: a process, composition of matter, a device, or an improvement to existing process, composition of matter or device.

2. Describe the basic characteristics of the invention.

3. Expand on novel and usual features which distinguish this invention from present technology.

4. Comment on possible uses for the invention.

5. Describe any disadvantages or limitations of the invention.

[Use additional sheets if necessary and attach descriptive materials that may promote a better understanding of the invention]

5. **PREVIOUS AND/OR FUTURE DISCLOSURES OF THE INVENTION:**

a. Indicate details of any full or partial disclosure of this invention such as: manuscript, article, report, grant application, thesis, abstract, poster, demonstration, sales catalogue, news release, internal memorandum, or oral presentation. **SPECIFY DATE AND ATTACH COPIES OF ANY WRITTEN DISCLOSURE.**

b. Describe in detail any plans for disclosure of this invention. (This may include submission of a manuscript, a formal publication, oral presentation, a showing, offer of samples, or a sale.)

(*Conception means the formation, in the mind of the inventor(s), of a definite and permanent idea of the complete and operative invention as planned as it is thereafter to be applied in practice.)

Review History: Last reviewed by the Policy Review Committee 04/28/10.

CONFIDENTIAL
Page 3 of 3

6. SPONSORSHIP FOR WORK LEADING TO THE INVENTION:

Sponsor(s):
Complete Agency Contract/Grant Number(s) ECSU Acct. #
Funding Period:
Principal Investigator(s):

7. PROSPECTS FOR COMMERCIALIZATION:

- a. Indicate any apparent commercial interest. Please name companies and specific persons, if possible.
- b. List names of older qualified firms with your comments, if any.

8. CONFLICT OF INTEREST INFORMATION: (use extra sheets as needed)

- 1. Do any of the disclosing parties serve either as a director, officer, or board member of the company or companies named in #7 above? If so, please list in what capacity each person serves.
- 2. Do any of the disclosing parties consult for any of these companies? If so, please list the company(ies) in which financial interest is held.
- 3. Do any of the disclosing parties hold a financial interest in any of the companies? If so, please list the company(ies) in which financial interest is held.

Signature(s) of Disclosing Party/Parties:

_____ Date _____
_____ Date _____
_____ Date _____
_____ Date _____

Signature of Person Witnessing This Disclosure: (This should be a non-disclosure with the technical expertise to understand the invention.)

The undersigned has read, understands and witnessed the above signatures on this Report invention:

(Name - please print)

(Signature)

(Date)