|  |  |  |
| --- | --- | --- |
|  | **Notice of Invention (NOI)****Confidential**Imminent Publication Date:      | INTERNAL USE ONLYDocket #      🞎 Legacy Rutgers🗹 **Legacy UMDNJ** |

**Questions**

Call: 848-932-4524

Email: otc-disclosures@ored.rutgers.edu

**Supplemental Documentation**

For any question that requires explanation, feel free to attach relevant supplemental documentation.

**Submission Instructions**

Email the completed form to: otc-disclosures@ored.rutgers.edu --**and**--

Send a hard copy with signatures via Campus Mail to:

Office of Research Commercialization

ATTN: Notice of Invention

33 Knightsbridge Road

2nd Floor East

Piscataway, NJ 08854

|  |
| --- |
| OVERVIEW |
| 1. Invention Title:
 |
| 1. One paragraph summary description of your invention. Please attach descriptions, manuscripts or drawings if available.

      |
| 1. Has the invention been made and tested (“reduced to practice”)? [ ]  Yes [ ]  No

When?       |
| 1. What steps are required to validate the invention both scientifically and commercially? Please include anticipated approximate timing.

      |
| 1. Is this invention related to a previous invention? [ ]  Yes [ ]  No

Identify the earlier invention:       |
| 1. What are potential applications and/or uses of this invention? Please identify the commercial products or services a company could develop using this technology.
 |
| 1. What are the unmet ***commercial/market*** needs that your invention addresses (economic benefits, competitive performance, raw materials, market and industry, safety, etc.)?

      |
| 1. What are the ***technical*** aspects of this invention that are novel relative to existing technology or products? (For a sound patent position, it is essential to demonstrate usefulness, novelty and non-obviousness.)

      |
| ENCUMBRANCE |
| 1. Has the invention been publicly disclosed? (Public disclosures include a publication, abstract, thesis, web-posting, poster presentation, oral presentation, awarded NIH grant or non-confidential conversation with persons outside of Rutgers that include essential details of the invention.) [ ]  Yes [ ]  No

Describe the circumstances, including with whom and the exact date. If applicable, attach a copy of the disclosure.     If not, will the invention be publicly disclosed in the near future? [ ]  Yes [ ]  NoWhen and how?       |
| 1. Was the initial idea written down or recorded? [ ]  Yes [ ]  No
 |
| 1. Date the invention was conceived:

Original records for the first complete description of the invention, oral or written, are (include dates):      |
| 1. Have you performed literature and/or patent searches? [ ]  Yes [ ]  No

What were your findings?     What keywords did you use?      |
| 1. In the table below, provide the full contract or grant number used for your research in development of this invention. Please include industry sponsored research, non-profit funding, governmental funding, applicable fellowships, etc., for each inventor.

|  |  |  |
| --- | --- | --- |
| **Funding Source/Sponsor** | **Contract or Grant Number** | **Principal Investigator/Supervisor or Fellow to whom awarded** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |

 |
| 1. Does this invention use/involve data or materials obtained/or derived from outside Rutgers? [ ]  Yes [ ]  No

Was the data or material obtained under a Material Transfer Agreement (MTA)? [ ]  Yes [ ]  NoEntity and Date:            |
| **Assignment** |
| 1. By signing this Notice of Invention, the contributors listed below that are subject to the Rutgers Patent Policy, hereby sell, assign and transfer to Rutgers, The State University of New Jersey, including its successors and assigns, their entire right, title and interest to the intellectual property disclosed herein, including all rights to claim priority therefrom.
 |
| **Contributor Information** |
| 1. List all of the key contributors for this invention. Include contributors from other institutions, and add as many as needed.

|  |  |
| --- | --- |
| Name:      Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Is the **principal contact** for this disclosure? [ ]  Yes [ ]  No |
| Citizenship:       | Institutional Affiliation:       |
| Work Address:       | Position:       |
| Work Phone:       | Department:       |
| Email:       | [ ]  Legacy Rutgers [ ] Legacy UMDNJ |

|  |  |
| --- | --- |
| Name:      Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Is the **principal contact** for this disclosure? [ ]  Yes [ ]  No |
| Citizenship:       | Institutional Affiliation:       |
| Work Address:       | Position:       |
| Work Phone:       | Department:       |
| Email:       | [ ]  Legacy Rutgers [ ] Legacy UMDNJ |

|  |  |
| --- | --- |
| Name:      Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Is the **principal contact** for this disclosure? [ ]  Yes [ ]  No |
| Citizenship:       | Institutional Affiliation:       |
| Work Address:       | Position:       |
| Work Phone:       | Department:       |
| Email:       | [ ]  Legacy Rutgers [ ] Legacy UMDNJ |

|  |  |
| --- | --- |
| Name:      Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Is the **principal contact** for this disclosure? [ ]  Yes [ ]  No |
| Citizenship:       | Institutional Affiliation:       |
| Work Address:       | Position:       |
| Work Phone:       | Department:       |
| Email:       | [ ]  Legacy Rutgers [ ] Legacy UMDNJ |

|  |  |
| --- | --- |
| Name:      Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Is the **principal contact** for this disclosure? [ ]  Yes [ ]  No |
| Citizenship:       | Institutional Affiliation:       |
| Work Address:       | Position:       |
| Work Phone:       | Department:       |
| Email:       | [ ]  Legacy Rutgers [ ] Legacy UMDNJ |

 |
| COMMERCIALIZATION |
| 1. Have you discussed the invention with any companies under a confidentiality agreement?[ ]  Yes [ ]  No

Please list each company:       |
| 1. List any relevant competing technologies and products:

      |
| 1. Are you aware of any companies that would be good commercialization partners for your invention? If you have contacts at these companies, please provide.

|  |  |  |
| --- | --- | --- |
| **Company** | **Contact** | **Email** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |

 |
| 1. Do you want to create a start-up company around this invention? [ ]  Yes [ ]  No
 |