



BIOLOGICAL MATERIALS INVENTION DISCLOSURE FORM (IDF) Colorado State University

General Instructions

The purpose of this Invention Disclosure Form (IDF) is to generate a written, dated record of the creation of the applicable biological materials and to provide information from which the commercial potential of those materials can be evaluated. The University needs this documentation to comply with most industrial contract requirements and the U.S. federal laws and regulations concerning grants and contracts. Please review the following information before completing the attached form.

- The IDF form is in Microsoft Word format and may be downloaded from the CSU Ventures website (<http://www.csuventures.org/bmidf.htm>). Once completed, it may be returned electronically; however one hard copy with all signatures will need to be sent via mail (P.O. Box 483, Fort Collins, CO 80522) or fax (970.484.0354).
- An IDF should be completed when something new and useful has been conceived or developed, or when unusual, unexpected or unobvious research results have been achieved and can be utilized.
- Identifying all individuals who contributed to the creation of the materials is very important. When completing this form, it is best to list the **pool** of individuals who contributed to the creation and/or development of the materials.
- To fully and properly evaluate the invention, CSU Ventures **must** receive all data supporting the materials (tables, charts, graphs, presentations, manuscripts, etc).
- Upon receipt of the signed, completed IDF, CSU Ventures will begin its internal review. Questions or requests for meetings to discuss the IDF will be directed through the Primary Contact; however CSU Ventures encourages all potential inventors to participate as much as possible.
- Please do your best to complete as much of this form as possible. Incomplete IDF submissions may be delayed. If you have any questions, please contact CSU Ventures at 970.482.2916.
- Add spaces and/or table rows as needed; otherwise do not modify the form. If a question does not apply, please mark "N/A." If for any reason the information you need to add does not fit within the boxes, please feel free to add information as an attachment as necessary.

For advice on completing this IDF or for additional information, contact CSU Ventures. Upon completion of the IDF, please return one (1) signed copy, along with all supporting documentation to:

CSU Ventures
P.O. Box 483
Fort Collins, CO 80522
Phone: (970) 482-2916
Fax: (970) 484-0354
Email: cindy.pederson@CSURF.Colostate.edu
Website: www.csuventures.org

Confidential

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Colorado State University

1. Title:

2. Creator Identification: please include all *potential* creators

<u>Primary Contact</u>	
Name:	
Citizenship:	
Home Address:	
Work Address:	
Phone:	Fax:
E-mail:	
Department:	

Name:	Name:
Citizenship:	Citizenship:
Home Address:	Home Address:
Work Address:	Work Address:
Phone:	Fax:
E-mail:	E-mail:
Department:	Department:

Name:	Name:
Citizenship:	Citizenship:
Home Address:	Home Address:
Work Address:	Work Address:
Phone:	Fax:
E-mail:	E-mail:
Department:	Department:

If more space is needed to identify all potential inventors, please provide the above information for each additional individual in an attachment.

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3a. Detailed Description of the Material: If necessary, additional descriptive information may be added as an appendix (e.g. data charts, graphs, publications, abstracts, grant applications, presentations, etc).

3b. What Are the Practical and Commercial Applications of the Material? (e.g. what problem does it solve?)

3c. What Are the Advantages of Your Material Over Currently Available Technologies?

3d. Have you Shared These Materials With Others?

4a. Did This Creation Utilize Outside Sources of Materials or Confidential Information: Please list all agreements (e.g. MTA, CDA, consulting, contracts, etc) involved in conception and development of the material.

Source	Materials/Information	Type of Agreement and Date

4b. List any known pre-existing technology which your material derives from integrates or otherwise would be required to utilize. If none, click here:

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5. Funding Sources: Please list all funding sources for materials, equipment and/or salaries of all personnel involved in conception and development of the material.

Funding Source	Name of Department, Company, Agency etc. (e.g. NIH, DOD, AHA, JDRF, etc)	Grant or Account No.	CSU 5-3 Account No.
Federal/Other Government Funds			
Corporate/Industrial			
Private/Public Foundation (e.g. AHA)			
University/Departmental			
Others (Please Specify)			

6. Please List any Companies You Find Are/Might Be Interested in Your Material. (Specific contacts are most helpful).

Name of Company	Contact Information

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The undersigned hereby declare(s) that they (he/she) are (is) the true and only creators(s) of the biological materials disclosed herein at Colorado State University, and that the invention arose in the course of work at or on behalf of Colorado State University and will be handled according to University Policy (Section J of the Academic Faculty and Administrative Professional Manual).

Creator Information			
#	Full Legal Name	Signature	Date
1			
2			
3			
4			
5			

If more spaces are needed for signatures of potential inventors, please add boxes as necessary.