

IP Office # _____

RUSH UNIVERSITY MEDICAL CENTER

REGISTRATION OF NEW IDEA FOR INVENTION FORM

Submit the original signed form to the Rush Intellectual Property Office, Suite 470 TOB, attn. IP Director. Please attach additional pages if necessary and denote which portions refer to which paragraphs.

This form is intended to provide a means with which to record an idea or discovery which might potentially lead to the development of an invention after its conception. Other accepted means of recording ideas or discoveries, such as co-signed lab notebooks, memos, or published or non-published articles should continue to be used in addition to use of this form.

At such time as the idea becomes more definite and a tangible invention develops, an Invention Disclosure form must be submitted in accordance with the terms of the Medical Center's Policy Regarding Patents, Copyrights and Licenses Resulting from Discoveries, Inventions, Writing, and Other Work Products.

1) Title:

2) Name(s) of person(s) who organized the idea:

#1	Last	First	Middle
Title			
Institution		Department	
Street	City	County	State
Citizenship	Office Phone		email
#2	Last	First	Middle
Title			
Institution		Department	
Street	City	County	State
Citizenship	Office Phone		email

#3	Last	First	Middle
Title			
Institution		Department	
Street	City	County	State
Citizenship		Office Phone	email

3) Description

- a) Describe how the discovery or method might function:

- b) If possible, sketch or attach a functional diagram (If applicable, chemical descriptions and/or formulas should be cited):

4) Object(s) or purpose(s) (Include any particular problems to which the discovery might be directed):

5) Relevant Dates:

- a) Conception:
Date: _____

- b) First written description
Date: _____
Place where recorded (lab notebook, memo, etc.)

- c) First disclosure to others:
Date: _____
To whom:

6) What additional efforts, including funding, will be necessary to further develop the idea?

7) List all federal agencies which provided funding for development of this idea.

8) Signature(s) of person(s) named in item #1:

#1. _____

Date: _____

#2. _____

Date: _____

#3. _____

Date: _____

8) Witnesses

#1. _____

Date: _____

#2. _____

Date: _____