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Date:

INVENTION DISCLOSURE FORM

Office of Research | American University of Beirut

AMERICAN UNIVERSITY OF BEIRUT OFFICE OF RESEARCH TECHNOLOGY TRANSFER UNIT INVENTION DISCLOSURE FORM

Inventor: List names of all inventors. Attach additional sheets, if more than 4 inventors.

• Inventor Name		Title	
Business Address		Business Phone	
Business Fax	Department_		
Email address			
Home Address			
		Citizenship	
• Inventor Name		Title	
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Email address			
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Business Fax	Department_		
Home Address			
Email address			
		Citizenshin	

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	ntribution of each inventor: This percenta ensing activities of this disclosure. Total mu	age will be used to distribute revenues generate oust equal 100%.	ed from
Inv	ventor:	<u></u>	
Inv	ventor:	%	
Inv	ventor <u>:</u>	%	
Inv	ventor:	<u></u>	
1.	Invention Title: (Descriptive yet concise)		
2.	drawings. The abstract is a brief summary comprises: a clear and complete description define the boundaries of patent protection invention below and attach any additional description address the following questions.	cation consists of an abstract, a specification and y of the contents of the specification. The specification of the invention and its usefulness; claims whon. Kindly, provide a detailed description of the al information or background documentation. I ons: What does the invention do? What is the n improvement over the existing state-of-the-a	cation nich n your
3.	Previous Disclosure: Has the invention b thesis?	peen disclosed in an abstract, paper, talk, news	story or
	Type of disclosure:(Please enclose a cop	Disclosure Date: py)	
4.	Future Disclosure: Is a publication or other	er disclosure planned in the next four (4) month	s?
	Type of disclosure:(Enclose drafts, abstra	Disclosure Date: racts, pre-prints)	
5.	Public Use or Sale: Has there been any pu	ublic use or sale of products embodying the inve	ention?
	Describe, giving dates:		

Adapted from the University of Rochester OOR

6. Dates and Places Related to the Invention

a. Conception date and the first written record of the idea

а

- b. When was the idea reduced to practice and where
- c. Was the idea developed/ created/ reduced to practice already, and if applicable please include a picture of this.

7. Sponsors

Provide complete and accurate information regarding the sources of financial support that may have contributed to the conception or development of this invention

	<u>Sponsor</u>	<u>Grant Number</u>
	1.	
	2.	
	3.	
	4.	
	5.	
	Identify any support through cor	ntracts with private businesses
	1. 2. 3.	
	Identify any anticipated future for	unding sources
	1. 2.	
no	Identify names of potential bus relty	inesses/companies/investors, who would be interested in this
	1. 2.	
8.	Applications of Invention: What	are the immediate and/or future applications of the invention?
9.	Novelty and Usefulness: Why is	this invention better? What are its novel and unusual features?

the problem? What are the advantages that your invention has over current solutions?

What problems does it solve? What is your approach to the solution, what are current solutions to

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overcome or other	Reduction to Practice: Is work on the invention continuing? Are there limitations to be overcome or other tasks to be done prior to practical application? Is there any test data? Have products, apparatus or compositions, etc., actually been made and tested?				
	rch: What further reso	earch and development is necessary or desirable before strial license?			
12. Related Developm	ents: Are you aware o	depends on accurate answers to the following items: of related developments by others? If "yes", please give or publications would be appreciated.			
13. Signature of Invent	tor(s)				
Signature	Date				
Signature	Date				
Signature	Date				
Signature	Date				

Adapted from the University of Rochester OOR

14. Signature of Witness

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Name (printed)				
Signature	Date			

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IMPORTANT NOTE: The Technology Disclosure requires the signature of a witness (other than one of the inventors), who has read and understood the invention disclosure on the date indicated next to his/her signature

Please hand deliver or mail the completed and fully signed disclosure to:

Technology Transfer Coordinator American University of Beirut P.O. Box 11-0236 College Hall, 2nd Floor Beirut, Lebanon Tel. 00-961-1-374968 Ext. 2989

