

1. Title of Invention:**2. Inventors and Contributors**

- a. Inventors:** List all individuals who have made an inventive contribution to this disclosure through the use of Western/Lawson resources (i.e., faculty, students postdocs, staff, visiting scientists, clinicians etc.) Attach separate pages if necessary

Legal Surname, Given Names (Name to match government - issued ID, i.e. passport)		Western/Hospital Number	Department (List any cross appointments or affiliated institutions)	Affiliation with Western/Lawson/LHSC/St. Joseph's (i.e. faculty, research assoc., post doc, student, staff, visitor, etc.)	e-mail Address	Personal Contact Info (HOME address, PERSONAL Phone #)	Brief description of contribution & overall % (Required for Assignment to Institution(s))*
Surname	Given Name(s)						

*If innovation is assigned to the institutions, percentage will be used as a basis for sharing future revenues. Revenue distribution agreed to by the parties in an assignment agreement will govern.

b. External Inventor(s): List all individuals who have made an inventive contribution to this disclosure using non-Western/Lawson resources (i.e. sponsor employees, academic collaborators, etc.)

Please include names, organization, contact information and email address

c. Contributors (Non-inventors): List all individuals at or external to Western/Lawson who have not made an inventive contribution but have contributed to the development of the invention. Please include name, organization and email address <https://worlddiscoveries.ca/2014/01/13/whos-the-crew-on-the-inventorship/>

It is the responsibility of all inventors to keep WORLDDiscoveries® informed of address changes

Please fill in the names of your Dean, Chair and/or Hospital/Research Institute Director.

Dean: _____ Chair: _____

Director: _____

For the Report of Invention (ROI) involving one of the affiliated institutions, The University of Western Ontario/Lawson Health Research Institute will reserve the right to share information in this ROI on a confidential basis, as part of an inter-institutional agreement. The University of Western Ontario/Lawson Health Research Institute are committed to the protection of all personal information in accordance with the principles set out in PIPEDA and the provisions of the University's Guidelines/Lawson's Policies on Access to Information and Protection of Privacy. The University/Lawson will comply with PIPEDA with respect to all personal information collected, used or disclosed by it in the course of commercial activities.

3. Location(s) of Work & Resources:

Please list all locations (Western/Lawson/Hospital and external) of the work leading to this innovation, be specific (i.e., department, building, hospital etc.)

4. Summary Description of Invention

Please provide a short summary here and attach any full-length descriptions such as a thesis paper to the end of this document. Enclose sketches, drawings, photographs, screen prints and other materials to help illustrate the description

5. Is this invention related to any other *Report of Innovation* previously disclosed?

6. What existing problem(s) does this invention solve?

7. What are the technical features of the invention that solve this problem(s)? How do these features solve the problem(s)?

8. How is the problem(s) currently solved by others?

9. How is this invention different than the other existing solutions?

12. Development History:

	DATE	Place, References, Comments
A – When did you come up with the initial idea?		
B – When did you first describe the invention - oral or written?		
C – When was your first successful demonstration? (reduction to practice)		
D – Are your lab books and other records in order and available?		Yes <input type="checkbox"/> No <input type="checkbox"/>

13. Funding Sources (mandatory) Please list all sources of funding related to the conception and development of this intellectual property. It is important that this information is accurate and complete because sponsors may have certain rights in the intellectual property

Sponsor	Project Title	ROLA #

14. Third Party Rights in the Intellectual Property. Are there any other agreements in place with a third party that may affect ownership of this intellectual property? Examples – Material Transfer Agreements (MTA), Confidentiality Agreements (CDA/NDA), Private Foundation Grants etc.

No Yes (please provide details)

15. Industry or Other Contacts for Commercialization (Optional). Do you know what Industry would be interested in this? Are you working with industry partners who would be interested in this invention? If yes, please list.

NB: Do you have any kind of relationship with this company (and/or any ownership interest in same) that could be perceived as a conflict of interest?

16. Additional Information or Comments (Optional).

17. Do you intend to assign the rights in this technology to the Institution?

*Note: **WORLDdiscoveries**[®] assists in the commercialization of innovations. Assignment to the Institution is required to secure that assistance, however, neither assignment nor securing assistance are mandatory under the applicable Intellectual Property Policy of your Institution provided the institutions do not have an obligation to sponsors*

Yes: No: Undecided:

18. Warranty

I/We, the Inventors listed in Section 2(a) have read, understood and agree to all of the preceding, and declare that all of the information provided in this disclosure is complete and correct. To the best of our knowledge, all persons who might legally make an ownership claim in this Innovation are identified in Section 2(a) and 2(b)

Full Legal Name (typed)	Signature	Date

Once complete, submitted to: ipm@uwo.ca

Acknowledgement of Receipt by WORLDDiscoveries[®]

 Souzan Armstrong
 Executive Director
 WORLDDiscoveries[®] Business Development Office

 Date

(To be completed by WORLDDiscoveries[®])

BDM handling this file: _____

Phone: _____ Email: _____

Within 30 days of receipt of this Report of Invention, a meeting with the Business Development Manager will determine whether additional information (detailed disclosure) is required.