**Carnegie Mellon University**

**DISCLOSURE OF INTELLECTUAL PROPERTY**

**BIOLOGICAL MATERIAL**

All information requested in this document must be completed in order to expeditiously process this Disclosure. Any missing or incomplete information may delay processing your submission.

**1. Title**:

1. **Creator(s): By signing this form the undersigned Creators acknowledge and agree that they are bound by Carnegie Mellon University’s Intellectual Property Policy, online at http://www.cmu.edu/policies/documents/IntellProp.html. Original signatures for all Creators are required. Therefore, by signing below: (i) if the Policy allows CMU to own this intellectual property and its associated intellectual property rights, you hereby assign to Carnegie Mellon any and all ownership you have in such intellectual property and intellectual property rights; and (ii) if the Policy allows CMU to receive license rights to this intellectual property and its associated intellectual property rights, you hereby grant to CMU any and all such licenses. Original signatures for all Creators are required.**

**a. Lead Creator:**

 print or type name signature date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 department phone current e-mail % of contribution

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of contribution to the IP (Briefly explain why this person is a creator)

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Nature of contribution to the IP (Briefly explain why this person is a creator)-continued

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Carnegie Mellon Employment Status at the time the intellectual property was created (Faculty, Staff, Student, Visitor, Courtesy, etc.)

 Full institutional address (if not affiliated with Carnegie Mellon)

 Full residential address (street, city, state)

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 Country of Residence

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 Country of Citizenship

**b. Next Creator:**

 print or type name signature date

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 department phone current e-mail % of contribution

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Nature of contribution to the IP (Briefly explain why this person is a creator)

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Nature of contribution to the IP (Briefly explain why this person is a creator)-continued

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 Country of Residence

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 Country of Citizenship

**c. Next Creator:**

 print or type name signature date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 department phone current e-mail % of contribution

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Nature of contribution to the IP (Briefly explain why this person is a creator)

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Nature of contribution to the IP (Briefly explain why this person is a creator)-continued

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 Country of Residence

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 Country of Citizenship

**d. Next Creator:**

 print or type name signature date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 department phone current e-mail % of contribution

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Nature of contribution to the IP (Briefly explain why this person is a creator)

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Nature of contribution to the IP (Briefly explain why this person is a creator)-continued

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 Country of Residence

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 Country of Citizenship

Please list additional inventor(s) and relevant information on an additional sheet.

**3.** Please provide a short description of the biological material and, if applicable, please attach any related unpublished and/or previously published documents. Feel free to attach sketches, drawings, photographs, compositional characteristics (e.g. structure, sequence, strain), and other materials that help illustrate the description.

**4. Intellectual Property Protections**

**For the question #4, please indicate the date in the format “Month/Day/ Year” (ex. 01/01/17).**

State first date of:

 a. Completion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 b. Publication/ Disposition (outside of CMU) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Sponsorship / Use of 3rd Party Resources**

**a.**

|  |  |  |
| --- | --- | --- |
| **External Sponsor(s)** | **CMU Oracle #(s) AND** | **Contract or Grant #(s)** |
|  |  |  |
|  |  |  |
|  |  |  |

(Your department administrator may be of assistance in identifying funding sources used.)

Have external sponsors been informed of or provided with the intellectual property?

**b. Internal Sponsor (Department Research Funds, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**c.** Was this intellectual property developed in collaboration with any other 3rd parties (companies, universities, etc.) or as a part of a research consortium? Please list below:

**d.** Was there any third party material used in the development of this intellectual property? Please list below:

**6.** Have you / do you intend to distribute the material? If so, please indicate where the material is/ will be available (check all that apply):

\_\_\_\_\_\_ Your website

 \_\_\_\_\_\_ Publicly available repository (please identify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_ Through a federal agency (e.g. NASA)

 \_\_\_\_\_\_ Other (please identify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_ Do NOT intend to distribute

Please feel free to attach additional material or data that would provide us with helpful information.

**Email the completed electronic copy of this Invention Disclosure form to:**

*innovation@cmu.edu*

*If unable to sign electronically, paper copies may be sent to:*

*Department Administrator*

*Center for Technology Transfer & Enterprise Creation*

*4615 Forbes Avenue, Suite 302*