

APPENDIX I

INVENTION DISCLOSURE FORM

*(Technology Transfer Unit  
Office of Grants and Contracts)*

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

• **Inventor** Name \_\_\_\_\_ Title \_\_\_\_\_ Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ Department \_\_\_\_\_  
Business Fax \_\_\_\_\_ Email address \_\_\_\_\_ Citizenship \_\_\_\_\_  
Home Address \_\_\_\_\_

• **Inventor** Name \_\_\_\_\_ Title \_\_\_\_\_ Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ Department \_\_\_\_\_  
Business Fax \_\_\_\_\_ Email address \_\_\_\_\_ Citizenship \_\_\_\_\_  
Home Address \_\_\_\_\_

• **Inventor** Name \_\_\_\_\_ Title \_\_\_\_\_ Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ Department \_\_\_\_\_  
Business Fax \_\_\_\_\_ Email address \_\_\_\_\_ Citizenship \_\_\_\_\_  
Home Address \_\_\_\_\_

• **Inventor** Name \_\_\_\_\_ Title \_\_\_\_\_ Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ Department \_\_\_\_\_  
Business Fax \_\_\_\_\_ Email address \_\_\_\_\_ Citizenship \_\_\_\_\_  
Home Address \_\_\_\_\_

**Contribution of each inventor:** This percentage will be used to distribute revenues generated from licensing activities of this disclosure. **Total must equal 100%.**

Inventor: \_\_\_\_\_ % \_\_\_\_\_  
Inventor: \_\_\_\_\_ % \_\_\_\_\_  
Inventor: \_\_\_\_\_ % \_\_\_\_\_  
Inventor: \_\_\_\_\_ % \_\_\_\_\_

**1. Invention Title:** ( Descriptive yet concise)

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

**2. Description of Invention (add additional sheets if needed):**



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1.

2.

Identify any anticipated future funding sources:

1.

2.

1. **Applications of Invention:** What are the immediate and/or future applications of the invention?

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7. **Novelty and Usefulness:** Why is this invention better? What are its novel and unusual features? What problems does it solve? What is your approach to the solution, what are current solutions to the problem? What are the advantages that your invention has over current solutions?

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8. **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?

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9. **Further Research:** What further research and development is necessary or desirable before showing the invention to a potential industrial licensee?

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**NOTE: Valid intellectual property protection depends on accurate answers to the following items:**

10. **Previous Disclosure:** Has the invention been disclosed in an abstract, paper, talk, news story or a thesis?

Type of disclosure: \_\_\_\_\_

Disclosure Date: \_\_\_\_\_

(Please enclose a copy)

11. **Future Disclosure:** Is a publication or other disclosure planned in the next four (4) months?

Type of disclosure: \_\_\_\_\_

Disclosure Date: \_\_\_\_\_

(Enclose drafts, abstracts, pre-prints)

**12. Public Use or Sale:** Has there been any public use or sale of products embodying the invention?

Describe, giving dates: \_\_\_\_\_

**13. Related Developments:** Are you aware of related developments by others? If "yes", please give citations. Copies of any relevant patents or publications would be appreciated.

**14. Signature of Inventor(s)**

**15. Signature of Witness**

	Signature
Date	Name (printed)

			Signature
Date	Signature	Date	

Signature	Date

Signature	Date

**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 signature**

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

Grants and Contracts Officer, Office of Grants and Contracts  
American University of Beirut  
College Hall, 2nd Floor  
Beirut, Lebanon  
Tel. 00-961-1-374968 Ext. 2979