

# **Step-by-Step Instructions to Complete a Disclosure Form**

## Are you ready to disclose?

You will need to report the grant numbers for any innovation that was funded using federal grant dollars (e.g., NIH and NSF funding). Please have those numbers ready as the University is legally required to report, in a timely manner, any innovations that arise from federal funding.

If you have questions, please contact our office. A listing of tech managers associated with each field of study is available here:

## When you are finished,

Save the document to your computer.

Press the 'Submit Form' button, which will open an email that will forward the disclosure form to the OTM. Please attach any supporting documents to the email before you click send. If the email client does not open, you may email the disclosure form and supporting documents to: [OTMsubmission@uic.edu](mailto:OTMsubmission@uic.edu)

Usually, you will receive an acknowledgement email within three business days informing you of the reference number (techID) and tech manager assigned to your innovation. Keep this number for your records. Should you need to contact the office, please provide this number so that any team member can quickly locate the associated file on your behalf.

We look forward to working with you.

**1. Title of Discovery:**

[Empty text box for Title of Discovery]

Write a short, descriptive title.



**2. Please provide a brief layperson's description of the invention and attach additional detailed documentation (e.g. manuscript, abstract, grant proposal, presentation, diagrams, etc.):**

*(If more space is needed, please provide the information on additional sheet(s) and include with your disclosure.)*

[Empty text box for layperson's description and documentation]

Write a short summary of the innovation. When you submit your disclosure form, you may submit additional documents that contribute to the explanation of the invention.



What problems does your innovation address?



**3. Please provide a brief description of the problem(s) solved by this invention:**

[Empty text box for problem(s) solved]

Why is your innovation better than currently available solutions?



**4. Please provide a brief description of the benefit(s) associated with this invention:**

[Empty text box for benefit(s) associated]

**5. Please select the stage of development applies to the invention:**

- |  |   |
|--|---|
| <input type="checkbox"/> Theoretical concept only                      | <input type="checkbox"/> Experimental proof of concept exists |
| <input type="checkbox"/> No further plans to conduct experiments       | <input type="checkbox"/> Working prototype exists             |
| <input type="checkbox"/> Experiments are planned, but do not yet exist | <input type="checkbox"/> Animal studies have been conducted   |

If the invention is nontangible, choose the theoretical concept.  
 If the invention is tangible, choose experimental proof of concept.

**6. Please provide the source of funds associated with this invention:**

Sponsoring Entity	Grant/Contract #	Primary
Ex: UIC Chancellor's Innovation Fund	Ex: POC project name	<input type="checkbox"/>
Ex: National Cancer Institute	Ex: CA105631	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

Include the contract # and organization that provided the funds to develop this innovation. Please note, the University is required to report to the federal government any innovations that arise from government funding. We submit this report to iEdison for you.

**7. If you have already published, submitted for publication, or publicly disclosed aspects of the invention, please specify the nature of the disclosure(s) and the associated date(s):**

Nature of Disclosure		Date
Nature of Disclosure		Date
Nature of Disclosure		Date

List where and how you have advertised or published your invention. Include posters and presentations in this list.

List where the research supporting your innovation will be advertised or published.

**8. Please provide any future plans to publish or present this discovery and the expected date(s):**

Nature of Disclosure

Date

Nature of Disclosure

Date

Nature of Disclosure

Date

**9. If an existing agreement applies to the invention, please specify the type and party involved:**

**Agreement Type**

- Material Transfer
- Confidentiality/Non-Disclosure
- Research/Collaboration
- Other

**Party to Agreement and PAF # (if available)**

List current agreements, if there are any.

**10. Can this invention be used as a research tool/reagent?**

*If "yes," please complete Section 14: The Appendix for Research Tools/Reagents on page 4:*

Yes       No

**11. If the invention is software, please specify the operating system and third party dependencies:**

[Empty text box for software dependencies]

**12. If you know of any companies which may be interested in your invention, please list:**

[Empty text box for interested companies]

Can this innovation be utilized in research laboratories? For example: antibodies, cell stocks, chemical reagents, animal models, and more.

What is necessary to run this software?

Please name any third party entities that would be interested in utilizing this innovation?

**13. Creator(s):** *(List the primary creator FIRST. If more space is needed to list all creators, please attach a complete list and include with your disclosure.)*

*Defined in Article III Section 2 of the General Rules Concerning University Organization and Procedure, "creator" refers to an individual or group of individuals who make, conceive, reduce to practice, author, or otherwise make a substantive intellectual contribution to the creation of intellectual property. "Creator" includes the definition of "inventor" used in U.S. patent law for patentable inventions and the definition of "author" used in the U.S. Copyright Act for copy written works of authorship.*

Last Name	First Name	E-mail	Phone	Department/Non-UIC Institution	Check box for VA Appointment
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

Remember to list the primary investigator first. List everyone, whether employed by UIC or not, who contributed to this innovation. Don't forget to include the department with which each creator is affiliated.

**14. Select all relevant novel categories that apply to the disclosed technology:**

- |  |   |
|--|---|
| <input type="checkbox"/> Mono/polyclonal or synthetic antibody                 | <input type="checkbox"/> Research platform                            |
| <input type="checkbox"/> Transgenic animal/genetically modified organism/virus | <input type="checkbox"/> Nanofabrication tools                        |
| <input type="checkbox"/> Cell line / stem cell                                 | <input type="checkbox"/> Benchtop research instrumentation            |
| <input type="checkbox"/> Transfection system / reagent                         | <input type="checkbox"/> Purification technology                      |
| <input type="checkbox"/> Protein expression systems                            | <input type="checkbox"/> Chemical matter—Organic catalyst             |
| <input type="checkbox"/> Plasmids or cloning systems                           | <input type="checkbox"/> Chemical matter—Pharmacophore/drug candidate |
| <input type="checkbox"/> Probes / detection system                             | <input type="checkbox"/> Chemical matter—Combinatorial scaffold/core  |
| <input type="checkbox"/> Bioactive peptides or other macromolecules            | <input type="checkbox"/> Chemical matter—coupling reagent             |
| <input type="checkbox"/> Engineered protein                                    | <input type="checkbox"/> Highly purified antigen (novel or known)     |
| <input type="checkbox"/> Research assay or drug screen                         | <input type="checkbox"/> Micro/proteomic array                        |
| <input type="checkbox"/> Clinical/tissue samples                               | <input type="checkbox"/> Disease model (cellular, xenograft, etc.)    |
| <input type="checkbox"/> Software  | <input type="checkbox"/> Other _____                                  |

← Select all that relate to the innovation.

**15. If the disclosed technology is a reagent, specify one of the following:**

- Infinitely scalable (e.g. bacterial strain, immortal cell lines, etc.)
- Limited quantity—difficult to produce. Specify the quantity available for distribution: \_\_\_\_\_
- Limited quantity—but can be batch manufactured.  
Indicate if you are willing to produce more material:  Yes  No
- Indicate if you would allow a third party to manufacture the material:  Yes  No
- Not applicable

← How much reagent is available to potential licensees?

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**Submit Form**



Before submitting your disclosure, save the file to your computer.

Then, press 'Submit Form' at the bottom of the disclosure form to open an email that will forward the form to [OTMsubmission@uic.edu](mailto:OTMsubmission@uic.edu)

Don't forget to attach any supporting information to this email.