

1. Title of Invention:

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2. Principal Inventor (and key contact person)

SURNAME, GIVEN NAMES:		Citizenship:
		Faculty/Dept/Other Affiliation:
Position:		Bldg & Room #:
Permanent Home Address:		Western/Hospital Employee # (Required):
		Telephone:
Inventorship share: _____ %		Email:
Signature:		Date:

3. Co-Inventor(s)

SURNAME, GIVEN NAMES:		Citizenship:
		Faculty/Dept/Other Affiliation:
Position:		Bldg & Room #:
Permanent Home Address:		Western/Hospital Employee # (Required):
		Telephone:
Inventorship share: _____ %		Email:
Signature:		Date:

SURNAME, GIVEN NAMES:		Citizenship:
		Faculty/Dept/Other Affiliation:
Position:		Bldg & Room #:
Permanent Home Address:		Western/Hospital Employee # (Required):
		Telephone:
Inventorship share: _____ %		Email:
Signature:		Date:

4. External Inventor(s)

SURNAME, GIVEN NAMES:		Citizenship:
Position:		
Institution:		
Institution Address:		Telephone:
Inventorship share: _____ %		Email:
Signature:		Date:

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

Note to Principal Inventor:

- a) If more Co-Inventors or External Inventors, please add separate sheet and check here
- b) If tenured at another institution, but Western adjunct or affiliated, please indicate.

This report of Innovation may be signed by wet or electronic signature, either of which will constitute proof of personal principal inventor consent to, and affirmation of, the content herein.

I, _____ (Principal Inventor), acknowledge that to the best of my knowledge there are no other co-inventors to this innovation. If in doubt, add names of potential inventors or collaborators below.

Other Collaborators:

Signature of Principal Inventor

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

Dean: _____ Chair: _____

Director: _____

For the Software Disclosure Report (SDR) 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.

5. Summary Description of Software (please use additional sheets if necessary)

What does it do? Enclose sketches, drawings, photographs, screen prints and other materials to help illustrate the description.

6. General Purpose and if known, Commercial Application of Software

7. a) Advantages and Unique Features of Software

Please identify, from your perspective, the **novel** and **distinguishing** features of the software. Consider what problem the software solves; how this solution differs from existing technologies and how these differences are advantageous over these existing technologies?

b) Alternative Software

Describe alternative software/products which you are aware accomplish the same purpose as your software, along with the companies that market, manufacture or make use of them. If not known, please state, "Not aware of any alternate software/companies".

8. a) Has it been developed with/by external contractors or consultants? If so, who?

b) List any open source code incorporated or external software applications included or used

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c) What programming language(s) has/have been used? What platform is it designed for and what is minimum hardware specification?

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9. What release version have you reached?

Idea Lab Test/Alpha Beta test Industry-validated Other

10. Public Disclosure or Public Use/Sale. List the titles and dates of all possible public disclosures of the intellectual property (past or future, internal or external) and attach copies of published or submitted versions. This request includes internal university disclosures as well. The public disclosure date is the date the material is or will be available to others.

Papers (including manuscripts, letters and abstracts):	Date:

Presentations and Posters:	Date:

Thesis (presentation and publication):	Date:

Websites:	Date:

Other Public Disclosures (including public use and sales):	Date:

11. Development History:

	DATE	Place, References, Comments
A - When did you come up with the initial idea?		
B - When was the first successful version created?		
C - Is it related to other software or invention? (List ROI or SDR #(s), if any previously reported to WORLDdiscoveries [®])		
D - Are your lab books and other records in order and available?		Yes <input type="checkbox"/> No <input type="checkbox"/>

12. Funding Sources. 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 #

13. 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.

- Yes** – Identify the third party
Please attach a copy of each agreement(s)
 No

14. What kind of license do you foresee for the released software?

- Academic Evaluation End User Commercial Open Source

15. In what form would the software be made available?

- Source Object Executable

16. What type and level of support (if any) will users of your software require? Can you provide any of this support?

17. 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.

18. Additional Information or Comments (Optional).

19. Do you intend on assigning 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.*

- Yes: No: Undecided:

Once completed please forward fully executed original to:

Manager, Intellectual Property and Administration
WORLDdiscoveries[®] Business Development Office
Western University, The Gordon Mogenson Building
100 Collip Circle, Suite 105, London, ON N6G 4X8

In addition, please forward an electronic copy to ipm@worlddiscoveries.ca (Word or PDF file)

If signed digitally, only an electronic copy is necessary.

Acknowledgement of Receipt by WORLDdiscoveries[®]

Lisa Cechetto
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.