

University of Calgary IP Disclosure Form – Reference Document

This reference document provides you with all the questions and fields you will need to complete on the [University of Calgary IP Disclosure Form](#). This document is to be used as a reference to help you prepare.

If you see an Asterix (*) this means that the field is required to complete the form. All other fields do not have to be filled.

The University of Calgary IP Disclosure Form is to be completed, as required by the University of Calgary's Intellectual Property Policy, to disclose inventions and discoveries created using University facilities and support. This information is collected under the authority of the Freedom of Information and Protection of Privacy Act.

Step 1 – Invention

- Invention Title*
- Abstract*
- Source of funding for project*
- Has your invention been funded by the Alberta Children's Hospital Foundation (ACHIF)? If yes, was it funded fully, or partially?
- Are there any existing third-party agreements related to this invention? (e.g. funding agreements/sponsored research contract, MTA, software licence, etc.)
 - o y/n? - If yes, please specify
- Request to apply to Canada's Oil Sands Innovation Alliance (COSIA) programs?
 - o y/n?
- Will ongoing University space/resources be required to commercialize? If yes, describe (NOTE: A response to this question is required if requesting a meeting with University of Calgary Research Services)
- Has the invention been described in a meeting, poster session, seminar, published paper or abstract?*
- o y/n?
- Software Inventions Only (NOTE: A response to this question is also required if requesting a meeting with University of Calgary Research Services):

Was any open-source software code used in creating the software?

- y/n?
- What programming language is the software written in?
- Have all authors/coders been listed?

Step 2 – Inventor

Corresponding Inventor's:

- Name (specify Dr./Ms./Mr.)*
- % Contribution*
- University*
- Faculty*
- Department*
- Institute*
- Address (including room number)*
- Telephone*
- Email*

More Questions:

- Will ongoing University space/resources be required to commercialize?
 - y/n? - If yes, describe (NOTE: A response to this question is required if requesting a meeting with University of Calgary Research Services)
- Do any of the Corresponding Inventors have a Cross-Appointment external to the University of Calgary (e.g. AHS, others)?
 - y/n? - If yes, please specify
- Department Head*
- Dean*
- Associate Dean (Research)*
- Institute Director of Chair*

Step 3 – Add Inventors (optional)

Second Inventor (if applicable)

Inventor's:

- Name (specify Dr./Ms./Mr.)
- % Contribution
- University
- Faculty

- Department
- Institute
- Address (including room #)
- Telephone
- Email