

—In Confidence—

Montana Tech #
Date Rec'd

**MONTANA TECHNOLOGICAL
UNIVERSITY**

INVENTION DISCLOSURE

In order to afford maximum protection and to comply with the requirements of College Policy and Government Contracts and Grants Policy it is important that inventions or discoveries, which may be patentable, be reported to the Office of Research and Graduate Studies at the earliest possible date.

PLEASE COMPLY WITH THE FOLLOWING DIRECTIONS IN COMPLETING THIS FORM:

Fill out and retain one copy as a permanent record.

Use supplemental sheets if necessary to amplify this information.

If you cannot answer any questions at this time, please so indicate.

1. Full names, addresses, and phone numbers of the inventor or inventors. Title and position (or other status)

_____	_____
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2. Invention Title _____

3. Concise description of invention: Attach a description of the invention, with photographs, drawings, sketches, or any other descriptive material. Description should be sufficiently detailed to enable one skilled in the art to understand and reproduce the invention and should include the construction, the principles involved, the details of operation, and alternative methods of construction or operation. Include any supporting evidence such as copy of laboratory notes, computer programs, drawings, etc. Be certain the description covers the following points:

- (a) Problem to be solved, or purpose of the invention
- (b) How invention solves problem
- (c) Similar inventions in current use, or old manner of performing the function of the invention
- (d) Disadvantages of old means
- (e) Degree of development

4. Date and place at which discovery was made: _____

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5. Names and addresses of other persons participating in the invention.

6. External funding that contributed to the invention:

A. _____ Grant No. _____

B. _____ Grant No. _____

C. _____ Grant No. _____

7. Date of Publications(s), if any _____

Where published _____

If there are any prior patent applications or patents by inventor on this subject, please list the Serial Number and filing date (include copies)

8. PLEASE INCLUDE AN ABSTRACT OF THE INVENTION. This will be used in our campaign to promote the invention, and should, therefore, be no longer than a type written page and **should not contain confidential information.**

9. MAJOR USE OR OTHER APPLICATIONS OF INVENTION. If specific commercial possibilities or companies are known; please include names and addresses on a separate page.

This disclosure is made to Montana Technological University under the Patent Policy in effect at this time.

Signature of Inventor(s)

Date

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