**Invention Disclosure Form**

*Revised 30th June 2023*

This form is to be completed and submitted to U.Porto Inovação by any member of University of Porto who believes to have developed a new invention. The purpose of this form is to enable U.Porto Inovação to evaluate whether legal protection should be sought and/or commercialization pursued. By signing this form the undersigned inventors acknowledge and agree they are bound by University of Porto Intellectual Property Regulation.

According to Article 3, clause 2 of the University of Porto Intellectual Property Regulation if you are a student or in case you are not employed by the University you will need, additionally, to fill, sign and enclose “Modelo 1” to the present Invention Disclosure Form.

Deliver the complete Invention Disclosure Form, in a closed envelope marked “Confidential”, to the service in charge of intellectual property in your Faculty or, if such service does not exist, directly to U.Porto Inovação (Praça Gomes Teixeira, s/n, 4099-002 Porto, Portugal). Additionally, please send an electronic copy of the Invention Disclosure Form and annexes to [patents@reit.up.pt](mailto:patents@reit.up.pt).

**Thank you for your cooperation and effort.**

1. **Invention Name (Please use technical terms and not trademarks)**

1. **Technological Domain (Please suggest 3-10 keywords that someone in your field or in industry will use to search for your invention)**

**Note: Try a Keyword Search at** [**http://worldwide.espacenet.com/**](http://worldwide.espacenet.com/)**, do you find any patents similar to yours? If so, attach these documents.**

1. Inventor(s) Information

List all inventors who directly contributed to the development of the invention.

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| Full Name (responsible inventor\*): |  | | |
| \*\* U.Porto Faculty: |  | % of Contribution: |  |
| \*\*\* Other Institution 1: |  | % of Contribution 1: |  |
| \*\*\* Other Institution 2: |  | % of Contribution 2: |  |
| Nationality: |  | | |
| Professional Address: |  | | |
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| City/Town: |  | | |
| Office Telephone: |  | | |
| Mobile Telephone: |  | | |
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| NIF (Tax Number): |  | | |

\* In case of multiple inventors, a Responsible Party for the invention or creation should be designated, the responsible inventor will be responsible for ensuring compliance with the duties established in Article 12 of the Intellectual Property Regulation of the University of Porto. All correspondence with, and questions for, the inventors will be addressed to the responsible inventor. The responsible inventor can be a professor, researcher, or any staff member working at the University of Porto.

\*\* If an inventor is affiliated with U.Porto he/she must include the specific institution in this field. If he/she has multiple affiliations with U.Porto he/she must insert the main institution in the scope of the invention and the remaining in the following fields. If an inventor does not have any affiliation with U.Porto, they must leave this field as blank.

\*\*\* If an inventor has more than one affiliation, he/she must distribute the percentage of his/her contribution among the entities he/she is affiliated with.

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| Full Name: |  | | |
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| \*\*\* Other Institution 2: |  | % of Contribution 2: |  |
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1. Patent Application Deadline

**4.1** Please provide the desirable deadline and reason (e.g. expected publication, end of project, other) for the submission of the patent application:

**4.2** Please disclose any pending tasks that may restrict the patent deadline:

1. Funding

Please indicate the source(s) of funding for the research that resulted in this invention by checking the appropriate box below:

None  Government/FCT  EC Funding  Industry Funding

University Funding  Other

List here more information about the funding obtained: the names of all government or industrial funding sponsors/partners, the corresponding contract or grant number(s), as well as the duration of project, amounts funded and for what purpose:

* 1. Are there any terms in the funding documents relating to rights of research results (right of first refusal or option)?

YES  NO

*If YES, please provide copy of funding document's requirements.*

* 1. Third-Party Technologies

Was the invention made from or does it incorporate materials provided by a third party?

YES  NO

*If YES, provide copy of relevant documents.*

* 1. Consortium Agreement

Is there any agreement implying the division of research results?

YES  NO

*If YES, provide copy of relevant documents.*

1. Technology/Invention Description

Briefly summarize the **nature** and **function** of the invention. The description should include the design, the principals involved and the details of operation. Sketches, drawings, photos, reports, copies of draft publication(s) or relevant proposal(s) will all be helpful.

* 1. Please provide a short, **CONFIDENTIAL abstract** describing your invention. This abstract should describe the advantages (faster, cheaper, stronger, etc.) of your invention

* 1. Please provide a short, **NON-confidential abstract** describing your invention. This abstract should only include information that can be divulged to end users and companies during the evaluation process.

* 1. State the **novelty** that distinguishes this invention from existing technologies.

* 1. Will this technology result in a **product or/and a service, please explain**?

* 1. What **problem(s)** does it solves, and **advantages/disadvantages** over existing technologies? Any comparative studies should be included.

* 1. What is the specific **utility in the marketplace,** what **market need** does it solve**?** Are there potential commercial interests? (Refer the market segments in which the technology could be applied).

* 1. Indicate, if possible, who the **competitors** are within the market segment, as well as similar products/services already in the market.

* 1. What do you see as the greatest **commercial barriers** to the adoption of the technology/invention by the market? Are there limitations to be overcome or other tasks to be completed prior to practical application?

* 1. Mark the current stage of readiness of your technology by ticking the correspondent box:

Basic principles observed and reported

Technology concept and/or application development

Test and evaluation (product/process development)

Demonstration/prototype (full or field relevant scale)

Commercial application

* 1. Describe the current stage of development of the invention. What further research and development is necessary? What Proof of Concept data have you collected for the technology (please attach this data)?

1. **Prior Disclosures**

Date of **public disclosures**, oral or written. List the names of any proposals, conferences, society meetings, thesis/dissertations, abstracts/poster presentations in which the invention was described. Also list any persons or groups to which the invention was presented at other meetings.

* 1. Publications. List the **date** and **citation** (e.g. journal, magazine, book, web site) of any publicly available articles, abstracts or theses that describe the invention or the technology. Copies of all such documents that have been or will be published are needed and compulsory.

* 1. If publication is expected soon (also include this document), where and when is it likely to occur?

1. Further Research

List any companies, specific individuals and their contacts, which may be interested in licensing the technology or sponsoring further research. UPIN may use these contacts for marketing the technology.

1. **Recommendations & Awards**

Are there any documents stating a positive opinion/evaluation of this technology/research (i.e. comments on known prior art, operability and commercial aspects).

1. **Signature(s)**

The inventor(s) must provide signature and date in the space provided below. This page should be copied for additional inventors:

|  |  |
| --- | --- |
| **SIGNATURE OF RESPONSIBLE INVENTOR**    **DATE (dd/mm/yyyy):** | **SIGNATURE OF INVENTOR**    **DATE (dd/mm/yyyy):** |
| **SIGNATURE OF INVENTOR**    **DATE (dd/mm/yyyy):** | **SIGNATURE OF INVENTOR**    **DATE (dd/mm/yyyy):** |
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