



**Technology Disclosure Form
Office of Innovation & Industry Engagement**

Please fill out to the best of your ability and attach additional sheets where necessary.

TITLE

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CONTRIBUTORS

The primary contact should be listed first and will be the point of contact for commercialization activities. Cut and paste for additional names or attach additional sheets if necessary.

Name (Primary Contact)	Department	
Home Address	Citizenship	Contribution %
Work Address	Student Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, select one of the following: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
Phone Number	Email	
Signature	Date	

Name	Department	
Home Address	Citizenship	Contribution %
Work Address	Student Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, select one of the following: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
Phone Number	Email	
Signature	Date	

For Internal Use Only

ID# _____

Date Received: _____



BRIEF SUMMARY OF TECHNOLOGY

Please provide a brief summary of the technology below, including a description of the function and purpose of the technology.

Within the summary or in attached supplemental materials, please provide the following:

1. A detailed description of the technology including any diagrams and drawings necessary to understand the technology;
2. A summary of the particular aspects of the technology which are believed to be distinctive over previous work or alternative solutions.
3. A description of how these distinctive aspects provide for advantages or improvements over existing technology;
4. A summary of all experimental data, modeling analysis, or prototype development, reflecting actual or expected performance of the technology
5. Possible modifications to the technology; and
6. References to or copies of related manuscripts, publications, posters, presentations, etc.

PREVIOUS WORK

Please provide any available information on other known technologies or efforts to develop technologies that satisfy similar objectives. Describe the particular advantages of this technology over others and how these advantages are made possible. Include descriptions of competing technologies and references to websites, articles, patents, etc. Attach additional sheets if necessary.



TECHNOLOGY SUPPORT

Yes No

Was this technology created through the use of any external funding (Federal, State, Corporate or Foundation)? If no, how was this work funded? If yes, please provide information on all related contracts, including sponsor name and identifying information such as Contract # or Michigan Tech Account/Index #.	<input type="checkbox"/>	<input type="checkbox"/>
Are there third party collaborators? If so, please list name(s) and organizations.	<input type="checkbox"/>	<input type="checkbox"/>
Were any materials or data from a third party used in the creation of this technology? If so, please list them and the name of the provider.	<input type="checkbox"/>	<input type="checkbox"/>
Are you aware of any other agreements which may relate to the rights to this technology? If so, please identify these contracts.	<input type="checkbox"/>	<input type="checkbox"/>
Is work on the technology continuing? If so, please list anticipated funding sources (RFPs, agencies, programs, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

COMMERCIAL POTENTIAL

Please check where appropriate and describe below or add additional attachments.

Yes No

What are the possible applications for this technology?		
What is the closest known alternative product or technology?		
Have you been in contact with or do you know of any companies that may be interested in licensing this technology or partnering in its development? Potential Licensees/Strategic Partners: (Please attach additional sheet if necessary)	<input type="checkbox"/>	<input type="checkbox"/>
If software, if a modification of an existing/prior work of others and it incorporate any elements that are not original to the listed contributor(s), identify that work and developer(s):		

PLANNED OR EXISTING PUBLICATIONS / PRESENTATIONS

To enhance the understanding of critical events, please provide accurate dates, including planned dates, for papers, posters, abstracts, talks, etc. Please mark N/A if there is no technology history.

Reference	Date	Comments