

CONFIDENTIAL

The Report of Innovation (ROI) is a written description of your invention.

It fulfils several important purposes:

- Assists in identifying the type of intellectual property that has been created;
- It helps Brock to assess whether the work is protectable through formal IP protection (eg. patent, copyright, industrial design, etc.);
- In the case of patenting, it helps the patent attorney or agent to prepare the draft patent, if we decide to proceed with patenting;
- It helps give Brock an early indication as to the ownership of your invention, and identify issues which will need to be addressed downstream; and
- It provides an important record of the date of invention, which can become important in future patent processes.

IMPORTANT

Discussions between you and Brock about your invention are confidential. To avoid any inadvertent public disclosure of your invention please consider all discussions about the invention confidential. Please use Confidential Disclosure Agreements to protect discussions with anyone outside the University. Please ask us for advice.

By signing this ROI you agree to keep its contents, as well as discussions with Brock about your invention confidential.

Internal Tech ID:

BDM:

(for office use only)

1. TITLE OF SOFTWARE

2. INVENTORS & CONTRIBUTORS

a. INVENTORS

List all individuals who have made an inventive contribution to this disclosure with Brock (i.e., faculty, students, postdocs, staff, visiting scientists, clinicians). Attach separate pages if necessary.

Legal Name <i>To match government issued ID</i>		Affiliated With <i>(i.e. faculty, research assoc., post doc, student, staff, visitor)</i>	Email Address	Personal Contact <i>(Home address, Personal Phone #)</i>	Brief description of contribution & estimate overall % <i>Required for IP Assignment*</i>
Surname	Given Name(s)				

**If the invention is assigned to Brock University, the percentage can be potentially used to inform the sharing of future revenues, as governed by a future IP Assignment agreement.*

b. EXTERNAL INVENTOR(S)

List all individuals who have made an inventive contribution to this disclosure using non-Brock resources (i.e. sponsor employees, academic collaborators, etc.) **Please include their name(s), organization, contact information and email address.**

c. CONTRIBUTORS (NON-INVENTORS)

List all individuals at or external to Brock University who have not made an inventive contribution but have contributed to the development of the invention. *Please include their name(s), organization and email address.*

It is the responsibility of all inventors to keep Brock University informed of address changes.

THE CHAIR/DIRECTOR/DEAN

Please fill in the names of your departmental Chair, Research Institute Director, or Dean of the Faculty.

3. LOCATION(S) OF WORK & RESOURCES

Please list all locations (Brock and external) of the work leading to this innovation, be specific (i.e. department, building, hospital)

4. SUMMARY DESCRIPTION OF SOFTWARE

Please provide a short summary and attach any full-length descriptions. Please describe what the software does. Enclose sketches, drawings, photographs, screen prints and other materials to help illustrate the description.

5. 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?

6. ALTERNATIVE SOFTWARE

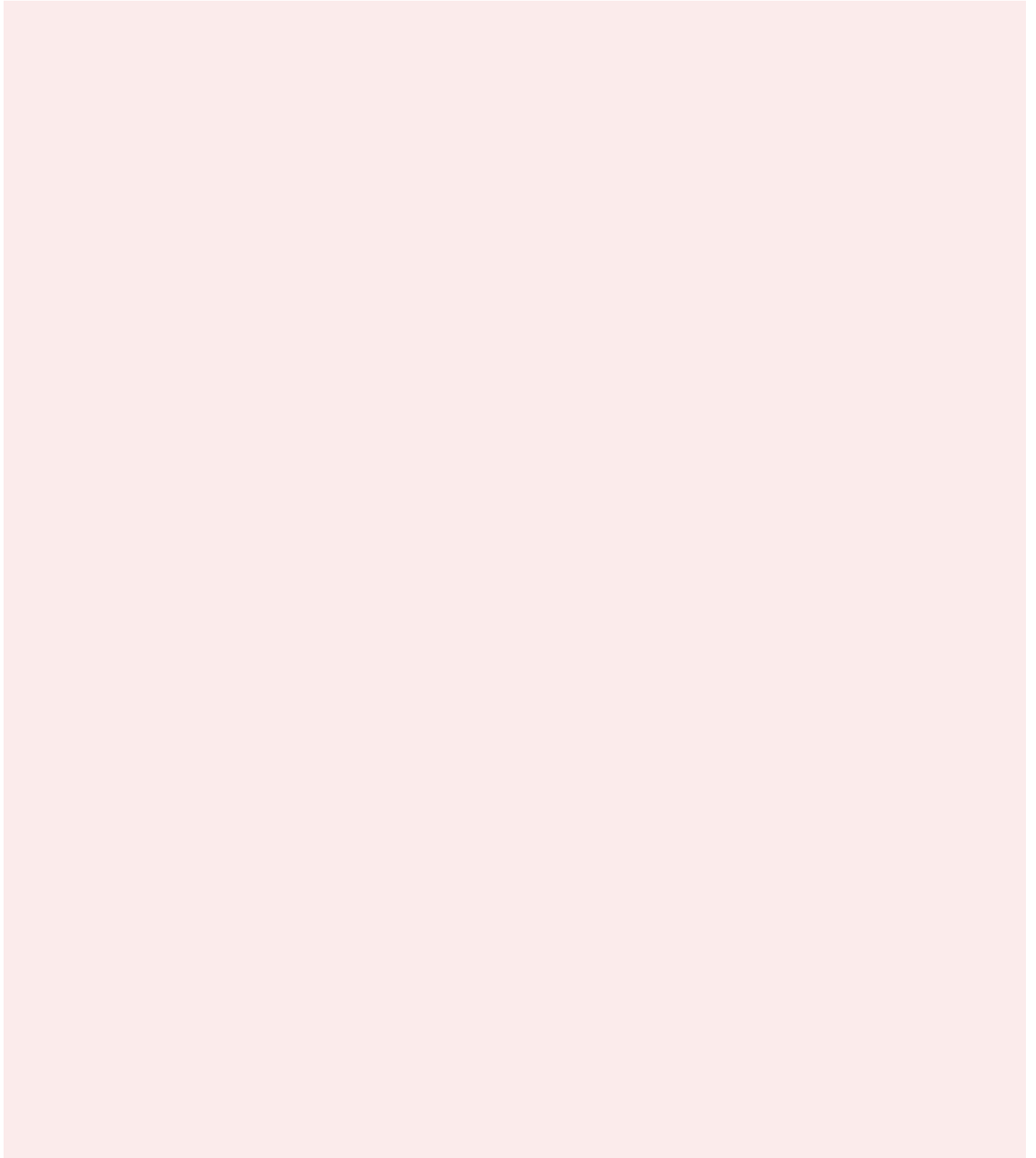
Describe alternative software/products which you are aware accomplish the same purpose as your software, along with the companies that market, manufacture or make use of them. If not known, please state, "Not aware of any alternate software/companies".

7. WHAT PROGRAMMING LANGUAGE(S) HAS/HAVE BEEN USED?

What platform is it designed for, and what are the minimum hardware specifications?

8. SOFTWARE ACCESSIBILITY

Please complete a list of all the third party code embedded in or accessed by the disclosed software where such software is run



9. YOUR ADVANTAGE/UNIQUENESS

What is unique or advantageous about this invention compared to existing technologies? How and how much is this invention better compared to the other existing solutions (e.g. x times faster, more efficient, less expensive)?

[Empty text area for response to Question 9]

10. STAGE OF DEVELOPMENT

What is the stage of development of this invention? Please indicate on the technology readiness level (<https://ised-isde.canada.ca/site/innovation-canada/en/technology-readiness-levels>) on the scale below, where TRLs 1-3 include basic, discovery research, concepts, and inventions proving a concept at the bench scale; and TRLs 4-8, the innovations move from invention and bench scale, to prototypes and pilot scale, to real products and full scale production. Level 9: Actual technology proven through successful deployment in an operational setting:



COMMENTS

[Empty text area for comments]

11. PUBLIC DISCLOSURE OR PUBLIC USE/SALE

List the titles and dates of all possible public disclosures of 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.

TITLE OF PAPERS

Papers (including manuscripts, letters and abstracts)

LINK

If Available

PRESENTATIONS AND POSTERS

DATE

THESIS

Presentation and publications

LINK

If Available

WEBSITE(S)

DATE

OTHER PUBLIC DISCLOSURES

Including public use and sales

DATE

FUTURE PUBLICATION PLANS

Please include timelines

DATE

12. DEVELOPMENT HISTORY

	Date	Place, References, Comments
A – When was the idea of the invention initially conceived?		
B – When did you first describe the invention – oral or written?		
C – When was your first successful demonstration? (reduction to practice)		
D – Who have you told about this invention?		
E. Has it been developed with/by external contractors or consultants? If so, who?		

13. FUNDING SOURCES (MANDATORY)

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	Approximate Start Date

14. 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 (please provide details) No

DETAILS

15. INDUSTRY OR OTHER CONTACTS FOR COMMERCIALIZATION (OPTIONAL)

Please provide us with the names (and contact details, if you have them) of any companies you are aware of who have an interest in the area of this invention, e.g. companies who sponsor research or who attend relevant conferences. Do you know what Industry sectors would be interested in this invention? Are you working with industry partners who would be interested in this invention?

Note: Do you have any kind of relationship with this company (and/or any ownership interest) that could be perceived as a conflict of interest?

16. ADDITIONAL INFORMATION OR COMMENTS (OPTIONAL)**17. DO YOU INTEND TO ASSIGN THE RIGHTS IN THIS TECHNOLOGY TO THE INSTITUTION?**

Note: Brock University assists financially in the commercialization of innovations. Assignment to Brock is required to secure that assistance.

Yes No Undecided

18. WARRANTY

I/We, the Inventors listed on page 2, have read, understood and agree to all the preceding, and declare that all the information provided in this disclosure is complete and correct. To the best of my/our knowledge, all persons who might legally make an ownership claim in this Report of Innovation are identified on page 2. By my signature I/we certify that, I/we will keep the contents of this Report of Innovation and discussions with Brock about my invention confidential.

Full Legal Name (Typed)	Signature	Date

Please return the completed form to Brock LINC.

Acknowledgement of Receipt by Brock LINC

Business Development Manager: Date:

Phone: Email Address:

Within 30 days of receipt of this Report of Innovation, a meeting with the Business Development Manager will determine whether additional information (detailed disclosure) is required.