

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 <u>confidential</u>.



Internal Tech ID:

				BDM:	
1. NAME O	F MARK				(for office use only)
2. INVENT	ORS & CON	ITRIBUTORS			
a. INVENTO	ORS				
List all indiv	viduals who l	have made an invent	tive contribution t	o this disclosure w	vith Brock (i.e
		ocs, staff, visiting so			
Legal	Name	Affiliated With		Danie and Cantant	Brief description of contribution
To match gove	rnment issued ID	(i.e. faculty, research assoc., post doc, student, staff,	Email Address	Personal Contact (Home address, Personal Phone #)	& estimate overall % Required for IP Assignment*
Surname	Given Name(s)	visitor)		Friorie #)	
		ned to Brock Universies, as governed by a			ılly used to inform the
snaring or r	uture revenu	les, as governed by t	i luture ir Assigili	nem agreemem.	
b. EXTERNA	AL INVENTO	R(S)			
			tive contribution t	o this disclosure u	sing non-Brock
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 MARK

Please provide a short summary and attach any full-length descriptions, for example, a thesis or publication draft, to this document's end. Enclose sketches, drawings, photographs, screen prints and other materials to help illustrate the description.

Please Include: i) The need for the mark ii) The goods or services the mark will be used in connection with iii) How the mark will be used with the goods and/or services (e.g., printed on the goods, used in advertising, labelling etc.)



5. PREVIOUS ROI

Is this invention related to any other Report of Innovation previously disclosed?

6. 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)?
7. TRADEMARK USAGE AND REGISTRATION INFORMATION
a. Does the mark have a design element to it? If yes, please attach a black and white copy of the design.
b. Has the mark already been used? If yes, please provide the date the mark was first used.
c. Do you have evidence of use? Yes No
d. Will the mark be used outside of Canada? If yes, list the countries where the mark will be used.



e. Has a trademark search beer If yes, describe the search results		Yes No		
8. FUNDING SOURCES (MAND	ATORY)			
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 Da	ite	
9. THIRD PARTY RIGHTS IN TH	IE INTELLECTUAL PROPERT	'Y		
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				



10. 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?
11. ADDITIONAL INFORMATION OR COMMENTS (OPTIONAL)
12. 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



13. 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.