



UAH INVENTION DISCLOSURE FORM (IDF)

Fill completely and submit to:

Office of Technology Commercialization
 Von Braun Research Hall, RM E-39
 256-824-6621

(For internal use only)
 Date:
 Docket #:

A. TITLE OF INVENTION:					
B. ATTACH DETAILED DESCRIPTION OF TECHNOLOGY WITH BACKGROUND AND DRAWINGS					
GRANT/CONTRACT #	SPONSOR(S)	PI	BEGINNING DATE	END DATE	
C. Has your invention been publicly disclosed? If so when? If it hasn't, do you have plans to publicly disclose it? If so when?					
D. Inventor(s) – Note: It is not necessary to obtain signatures from non-UAH inventors.					
First Name	Middle Name	Last Name	First Name	Middle Name	Last Name
Signature:			Signature:		
Home Address:			Home Address:		
City:	State:	Zip:	City:	State:	Zip:
UAH A#:	Citizenship:	Royalty Split: _____ %	UAH A#:	Citizenship:	Royalty Split: _____ %
UAH Inventor? YES NO			UAH Inventor? YES NO		
Department:		Supervisor's Signature:		Department:	