

## **UAH INVENTION DISCLOSURE FORM (IDF)**

Fill completely and submit to:				Office of Technology Commercialization Von Braun Research Hall, RM E-39 256-824-6621			Date	(For internal use only) Date: Docket #:		
A. TITLE OF INVENTION:										
B. ATTACH DETAILED DESCRIPTION OF TECHNOLOGY WITH BACKGROUND AND DRAWINGS										
GRANT/CONTRACT # S		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		9	Last Name
Signature:					Signature:					
Home Address:					Home Address:					
City: Madison	State: AL		Zip:		City:	St		State:		Zip:
UAH A#:	Citizei	nship:	Royalty	Split: %	UAH A#:	: Citizensł		enship:		Royalty Split:%
UAH Inventor? YES NO					UAH Inventor? YES NO					
Department:	nent: Superviso		sor's Sign	or's Signature:		Department:		Supervi	Supervisor's Signature:	
Is this technology ITAR or export controlled?										