SUBJECT: Intellectual Property

1. It is the responsibility of each member of the faculty, professional staff, and student body to be familiar with the LSU System policies that pertain to intellectual property. These policies are set forth in the Bylaws and Regulations and the Permanent Memoranda of the Board of Supervisors of the LSU system. The following documents are especially relevant:
   a) Chapter VII of the Bylaws and Regulations: Intellectual Property
   b) PM 15: Copyright Guidelines Regarding Electronic Learning
   c) PM 16: Technology Transfer
   d) PM 64: LSU Intellectual Property

   Also, the following documents contain information indirectly related to intellectual property:
   a) PM 11: Outside Employment of University Employees
   b) PM 67: Contracts Between the University and Its Faculty Members

2. In general, it is the responsibility of each LSU Eunice employee and student to disclose any creation that has potential commercial value. This requirement can be satisfied by completing a Technology Disclosure Form, which is then submitted to the appropriate supervisor. Submission of the completed Technology Disclosure Form will satisfy item A of the LSU Eunice Employee Invention and Proprietary Information Agreement. Completed forms will be retained in the Office of Business Affairs.
LSU Eunice
Technology Disclosure Form

1. Title of Invention: ________________________________________________________________

2a. Inventor’s Name* Dr./Mr./Ms./ ___________________________ __________________________
    Last               First                Middle

Position/Title: ___________________________________ Social Security: ___________________________

Current LSU Eunice Address: ____________________________________________________________
    Department                                                                 Office

Tel.: __________________ Fax: __________________ E-mail: ________________________________

Residence Address: ________________________________________________________________
    Street                               Apt. No.

_________________________________________________________ ____________________________
City                        State                        Zip Code

2b. Inventor’s Name* Dr./Mr./Ms./ ___________________________ __________________________
    Last               First                Middle

Position/Title: ___________________________________ Social Security #: ______________________

Current LSU Eunice Address: ____________________________________________________________
    Department                                                                 Office

Tel.: __________________ Fax: __________________ E-mail: ________________________________

Residence Address: ________________________________________________________________
    Street                               Apt. No.

_________________________________________________________ ____________________________
City                        State                        Zip Code

(IF MORE THAN TWO INVENTORS, PLEASE ADD ADDITIONAL SHEETS)

3. Please give details of the sponsorship that led to the invention. If possible, attach a copy of
   the contract/agreement.

Federal (including pass through funds): ___________________________ Contract No.: __________

State: ___________________________ Contract No.: __________

Industrial Company: ___________________________ Contract No.: __________

LSU Eunice: ___________________________ Contract No.: __________

Other Sponsors: ___________________________ Contract No.: __________

* Tentative listing of inventor(s) subject to verification by patent counsel in accordance with Federal law.
4a. Brief description of the invention and its advantages:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4b. Possible areas of commercial application of the invention:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
________________________________________________________________________

5. Brief description of presently used technology and its disadvantages:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
6. Is any material used in this invention covered by a material transfer agreement? ____YES ____ NO (If YES, attach a copy.)

7. Have you made a patent search or a literature search? ____ YES ____ NO (If YES, attach copies of the closest references you found.)

8. Is any information related to this disclosure classified? ____ YES ____ NO (If YES, attach details.)

9. Has the invention been reduced to practice? ____ YES ____ NO (e.g., apparatus assembled and tested or modeled)

   Are laboratory records and data available? ____ YES ____ NO

10. Have you made any public disclosure of the invention? ____ YES ____ NO

    If YES, please list details and EXACT dates. (Public disclosure includes published article or abstract in a journal or proceedings; a presentation or poster at a conference; preprints distributed outside LSU Eunice; a thesis or dissertation cataloged and shelved in a public library; prototype exhibit; posting on Internet; etc.)

    a. __________________________________ Month ________ Day ________ Year ________
    b. __________________________________ Month ________ Day ________ Year ________
    c. __________________________________ Month ________ Day ________ Year ________

    If NO, do you plan publication?

    ________________________________ Month ________ Day ________ Year ________

11. (FOR COPYRIGHT ONLY) Have you included copyright notices on all printed information/documentation and displayed copyright notices on the title screen of your software? ____ YES ____ NO

12. Do you personally wish to take a License under this invention from LSU Eunice? ____ YES ____ NO

13. If you know of any firms who might be interested in licensing this technology, attach a list with the following information:

   Company name: ___________________________________________________________

   Address: _________________________________________________________________

   Contact person: ___________________________________ Telephone: _____________

Signature(s) of Inventor(s)

_________________________________ Date: ________________________________

_________________________________ Date: ________________________________

Witness: (Note: A co-inventor should not be a witness.)

_________________________________ Date: ________________________________

Signature of Witness