

DECLARATION OF INNOVATION

When individual(s) affiliated with Nipissing University (faculty, researcher, staff, student) have created an innovative contribution with or without using Nipissing University resources (lab spaces, equipment, software licenses, funds, etc.) they will complete this form in accordance with Nipissing University's Intellectual Property and Commercialization policies (where applicable).

Intellectual Property and Cor	mmercialization policies (where applicable).	, ,		
Fitle/Name of Innovation:					
Inventors/Creators (Nipissing University): List any individuals internal to Nipissing University who have made an inventive or creative contribution to this invention/project/innovation. Attach additional pages as needed.					
Inventor/Creator #	1	2	3		
Name:	·	=	·		
Department (e.g., Computer Science)					
Position title (e.g., Professor, Student)					
Email:					
Phone:					
Details of role in project:					
Inventors/Creators (Extern List any individuals outside of the invention/project/innovat	of the Nipissing University	community who have mad	le inventive contributions t		
Inventor/Creator #	1	2	3		
Name:					
Department (e.g., Computer Science)					
Position title					
(e.g., Professor, Student) Email:					
Phone:					
Details of role in project:					
Details of role in project:					



Contributors:

List any individuals, either internal or external to Nipissing University, who have made a valuable but not inventive contribution to this invention/project/innovation.

	<u> </u>		
Contributor #	1	2	3
Name:			
Department			
(i.e., Computer Science) Position title			
(i.e., Professor, Student)			
Email:			
Phone:			
Details of role in project:			
Botano or roto in projecti			
Invention Description: Please describe this invent Trademark, Trade Secret). project was conceived and project was developed with needed.	Please highlight its novel, came to fruition. Also desc	patentable, or innovative as cribe any university resource	spects. Explain how the es used, or, detail how the
Dissemination: Please list any internal or e speaker series, conference none, please indicate "not a	s, book chapters) regardin		



Funding Sources:

Using the table below, please indicate any forms of funding you received for your research and development of this invention/project/innovation. Examples of funding sources include Tri-Agency Funds (CIHR, NSERC, SSHRC), Graduate Scholarships, CFI, etc.

Name of Fund	PI Name		Project Title	-	Funding Amount
			<u>L</u>		<u> </u>
Learning Library, Cer	ntres for Literac	y, lab s _l	as software licenses (NVivo paces), equipment (mass sp pat were used to conceive ar	ectrometer, lab ed	quipment), funding
Name of Resource		Resour	ce Type (Funding, Space,	Dates Accessed (a	pproximately)
			e, Equipment)	`	
b) Describe use of Ni	pissing Univers	sity Reso	ources:		
a) Deceribe use of Me	an Nininging Hr	nivoroity	Dogguroos:		
c) Describe use of No	m-inipissing or	liversity	Resources.		



Third Party Agreements

Please detail any other organizations who have rights to the invention/project/innovation that must be honoured. Are there any written contracts or agreements (i.e., material transfer, data transfer, confidentiality, partnership agreements, memorandum of understanding, etc.) related to the research and development of the project? If none, indicate "not applicable."				
Have a	ctual Property Applications: ny patent or other intellectual property applications been filed regarding this on/project/innovation? If none, indicate "not applicable."			
	for Commercialization: indicate any ideas or plans to bring this project to market.			
a) b)	Do you intend to create a start-up to commercialize this invention/project/innovation? Do you have a relationship or have you made contact with any companies who would be interested in this innovation? o If yes, explain:			
c)	In the event that Nipissing University does not have an obligation to sponsors, would you prefer to: Commercialize on your own Work with Nipissing University to Commercialize Unsure			
	Details: ere any further details of which the university should be made aware?			
Attacto	ation.			

Attestation:

The above listed person(s) declare and attest the following:

- I/We have read and understood the Nipissing University Policy for Intellectual Property
- The invention/project/innovation was conceived and developed by me/us privately without significant use of facilities owned, operated or administered by Nipissing University or funds administered through Nipissing University
- All persons who might claim ownership or involvement in this invention/project/innovation have been named on this form, to the best of my/our knowledge



- I/We are not aware of any commitment (i.e., industry partner, government sponsor, individuals) that
 would limit or inhibit Nipissing University's ability to carry out its responsibilities to third parties or
 under Nipissing University policies in relation to the invention/project/innovation
- I/We understand that if the invention/project/innovation is deemed to have made significant use of Nipissing University facilities or administered funds, an Invention Disclosure form must be completed in accordance with Nipissing University's policies for Intellectual Property and Commercialization
- All of the information provided in this declaration form is complete and correct

Name:	Date:
Signature:	
Name:	Date:
Signature:	
Name:	Date:
Signature:	
Department Chair/Director (for faculty), Could have reviewed this document with the above liaccurate to the best of my knowledge.	rse Instructor/Supervisor (for students): isted individual(s). The statements included on this form are
Name:	Date:
Signature:	
Associate Vice President, Graduate Studies, I have reviewed this document and recommend	• • • • • • • • • • • • • • • • • • • •
The Innovator(s) did not make substar with independent commercialization, a	ntial use of university resources and are free to proceed as desired
The Innovator(s) made use of universi commercialization. The Inventor may	ity resources, but the university does not intend to pursue proceed with independent commercialization, as desired. e of university resources. Further discussion surrounding
Name:	Date:
Signature:	
Please submit the completed form to discover@	Dnipissingu.ca.