### ub_166px klein

Confidential Invention Disclosure and  
Inventor Declaration Form

Completing this form is the first step toward protecting and commercializing your invention. The form is a guide for the invention disclosure and a declaration of inventorship and is offered to provide optimal support and service to you.

Pursuant to §60 personnel statutes Canton of Bern (Personalgesetz des Kantons Bern, BSG 153.01), and §70 of the law on the University of the Canton of Bern (Gesetz über die Universität des Kantons Bern, UniG, BSG 436.11), respectively §332 of the code of obligations (OR, SR 220), inventions developed by staff of the University and/or University Hospital Bern (Inselspital) in the course of fulfilling their employment obligations are property of their employer. It is understood that University Hospital Bern may transfer its inventions to the University in order for University to take care of its protection and outlicensing (based on the respective agreements between University and University Hospital Bern).

Unitectra is the official technology transfer organization of the University of Bern and supports University of Bern with the protection and commercialization of inventions. Therefore, inventions have to be reported to Unitectra. This also applies to inventions made at the University Hospital Bern.

**It is very important that the invention is not published or presented at a scientific meeting before the invention disclosure and a potential patent application.**

**Please send the completed form with wet-ink or electronic signatures of all inventors to Unitectra.**

For any questions, please contact **Unitectra**.

**Please send the completed form to:**

#### Address Unitectra Technology Transfer University of Bern Hochschulstrasse 6, 3012 Bern Tel. 031 684 37 81

**Email**: mail@unitectra.ch

**Web:** www.unitectra.ch

**File No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**(to be filled in by Unitectra)

A) Inventors *(pls. attach any additional information or documentation)*

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| *An inventor is a person who conceived the invention (not just contributed to its reduction-to-practice). Please note that the definition of an inventor is different and narrower than how co-authorship of a scientific publication is treated. E.g., providing support or performing or setting up experiments using state of the art methods following instructions, while valuable to the research process, does not necessarily indicate an inventive contribution.*  *Failure to correctly name inventors might lead to the loss of the protection rights. List also all external inventors.* |

1) Inventors: Please complete all details in the table below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name | Last name | Position and employer at the time the invention was conceived (University plus address of Institute/Department/Clinic)\* | Private Address/E-mail /Nationality | Contribution to invention (%); leave blank if equal |
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*\*Please flag if any of the inventors contributed to the invention while not being an employee at University of Bern or University Hospital Bern (e.g. visiting scientist, master student, etc.)*

B) Invention *(pls. attach any additional information or documentation)*

1) Short description of the invention.

2) What is the current stage of the invention? What exactly have you achieved so far?

3) Which specific experiments have been carried out to prove the principle of the invention or how do you plan to do so (indicate milestones and estimated time frame)?

4) Quantify the available resources (manpower, finances) for further development of the invention.

C) Intellectual Property

1) a) When did you first publicly speak about or publish your invention or when do you plan to do so?

b) Has the idea behind your invention ever been published, publicly discussed, or patented by others?

2) a) Describe the closest state of the art in the field of your invention. Pls. provide representative literature and/or patent documents

b) What makes your invention unique from the state-of-the-art? Which are the deficiencies of the state-of-the-art that your invention improves?

c) What are the potential disadvantages of your invention compared to the state-of-the-art?

d) What alternatives to your invention do exist in the same field (to solve the same problem)?

3) a) Who funded the research which led to the invention? Please list all sources of funding and provide Unitectra with the respective agreements / documents.

b) Do you have any active or past agreements/contracts with industrial, academic, governmental or any other partners in this field under which certain obligations to such third parties could exist?

4) Has any proprietary material (e.g. cell line, antibody, plasmid, computer software, or chemical compound) or confidential information obtained from outside your laboratory been used to develop this invention? Was this under a (material) transfer agreement, license agreement or non-disclosure agreement? If yes, pls. specify and attach a copy.

D) Commercial Potential

1) What is the commercial use of your invention?   
What is/will be the marketable product?

2) What is the market need that your product fulfils? Why should somebody buy the product?

3) What is the estimated market size?

4) How long will it take to develop a marketable product and what are the estimated development costs? Which regulatory hurdles do you expect?

5) Which competitive products exist already?

6) Which potential licensees do you know? Name companies and contact persons that are active in the field of your invention.

7) Are you planning to found a spin-off company to commercialize the invention?

8) What is or might be the greatest obstacle to the commercial adoption of your invention?

E) Comments

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F) Declaration

**The active support and full collaboration of the inventors for the patenting process, and also for promoting the technology in order to license it to industrial partners is essential. By signing this form, I hereby declare that**

* I will provide all information and assistance deemed necessary and will sign with due diligence all the required administrative documents, to help the University of Bern to secure patent protection for my invention, should the University of Bern decide to file a patent application.
* I am inventor of the above-mentioned invention and that I am not aware of any additional inventors to this invention other than as set forth above.
* I made the invention during my employment at the University of Bern and/or University Hospital Bern and therefore it is owned by the University of Bern and/or University Hospital Bern (as per respective laws and by-laws).
* I know that, as an inventor, I have the right to a share of net income from licensing the invention pursuant to the distribution scheme of the University of Bern applicable at the date of such distribution.
* I declare that any address changes will be communicated promptly to:  
  Unitectra, Technology Transfer University of Bern  
  current address: Hochschulstrasse 6, CH-3012 Bern
* if I should not fulfil my duties as set forth above, such non-fulfilment shall be considered as my will to refrain from my right to participate in license income. My respective share shall become part of the share falling to the University of Bern.
* As required, I hereby authorize any practitioner to insert here in parentheses (Appl. No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) the application number of any U.S. Patent Application that relates to the above-mentioned invention.

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| **Signatures** |
| Inventor Name: Signature:  Tick box if you have (partly) contributed to the invention while **not** being an employee at University of Bern or University Hospital Bern. |
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