# 1. Title of Invention:

2. **Inventors.** Please list all individuals who made an inventive or creative contribution to the invention.

a) Toronto Metropolitan University (TMU) Inventors (if there are more than four inventors, please use additional pages):

SURNAME	GIVEN NAME	DEPARTMENT (If you are cross-appointed, list the department where the inventive work took place)	AFFILIATION WITH TMU (i.e., faculty, research assoc., post- doc, student, staff etc.)	ADDRESS PHONE EMAIL

b) External Inventors. Please provide names and affiliations of non-TMU inventors, i.e., sponsor employees, academic collaborators, etc. (Please use additional pages if necessary):

SURNAME	GIVEN NAME	ORGANIZATION	ADDRESS PHONE EMAIL

3. Where did the research leading to this invention take place?

DATE RECEIVED:	TMUID:
	(For VPRI use only)

### 4. The Invention

 a) Description. Please highlight the novel aspects of the invention. What does the invention do? How does it do it? What is the significance of the invention? How is it an improvement over the existing state-of-the-art? What are the potential applications? (Please attach any additional pages, information or background documentation).

- b) Validation. What level of testing/validation has already been conducted for the invention? None
  Market testing of invention
  Functional testing of prototype/method to determine if it operates as intended
- c) Protection. Has a patent application or other statutory protection already been filed for the invention? NO YES. If YES, please provide details:
- d) **Timing.** Are there any special time sensitivities for this invention? NO YES. If YES, please explain:

#### 5. Public Disclosure

a) Has the invention been publicly disclosed? (i.e., discussions with collaborators, abstracts, journal publications, conference presentations or proceedings, seminars, grant applications, poster sessions, industry meetings) NO YES. If YES, please provide details:

b) Will it be publicly disclosed in the near future? NO YES If YES, please explain:

### 6. Research Support

- a) Internal Funding. Was any TMU funding (excluding normal salary and operational costs) or extraordinary resources provided to support the research that led to this invention (this may include departmental, faculty or central funds or resources)? NO YES. If YES, please provide details:
- b) **External Funding.** Please list all the external research funding sources that were used to support the research leading to this invention, including funding from Tri-Councils, foundations, industry and government.

Sponsor	Cost Centre	Project title	

c) Other Support: Is the research that led to the invention subject to any other conditions or obligations (i.e., any material transfer, confidentiality, non-disclosure, collaboration or other agreement) not referenced above? NO YES. If YES, please provide details:

## 7. Warranty

I/We, the Toronto Metropolitan University inventors listed in Section 2(a), have read, understood and agree to all of the preceding and declare that all of the information provided in this disclosure is complete and correct. To the best of our knowledge, all persons who might legally make an ownership claim on this invention are identified in Sections 2(a) and 2(b).

Signature Typed Name:	Date	Signature Typed Name:	Date
Signature Typed Name:	Date	 Signature Typed Name:	Date