



Invention Disclosure Int. ref. No.

For any question and to submit the form, please contact

Andrea Foglia
Technology Transfer Manager

Via Francesco Chiesa 5, 6500
Bellinzona

andrea.foglia@usi.ch

+41 58 6664522
www.irb.usi.ch



Invention (if more than 4, please add them in an annex)	Family name, initials				
	Employer (hiring year)				
	Function				
	Inventive contribution (%)				
	Private address				
	Private Phone / E-mail				
	Nationality(ies)				

Invention conception	Date			
	The invention has been already disclosed in writing or oral?	Yes	No	If yes, date
	Planned publication?	Yes	No	If yes, date
	Invention conceived in the frame of a project / contract (NDA/MTA/other) / external funding?	Yes	No	If yes
	Prior art search done?	Yes	No	

If yes, support novelty / inventiveness

Commercial application of the invention	Industrial field(s) of application / product(s)?			
	Stage of development	Idea	Proof of concept	Working prototype
	Inventing around	Easy	Difficult	Alternative available
	Market potential	Niche market	Medium	Blockbuster
	Contact with companies (please name them)?			
	Do you wish to exploit the invention by founding a spin-off company?	Yes	No	

Signing inventor(s) committed to actively cooperate with IRB Foundation and the Technology Transfer Office where specified, including but not limited to keep the information of this form confidential, actively support patent prosecution and to search for interested licensee.

Signature(s) of all inventor(s)

Date

Annex	Invention Disclosure Information	Publication
		Description of the invention (confidential)
		Prior art search
		Other:
		Keyword(s) of the invention:

Please, answer the following question (problem-solution approach):

What is the technical issue solved by the invention?

How this technical issue has been solved so far?

How this technical issue is solved by the invention?

What is the added value of the invention over the state of the art?
