LSU Eunice PS No. 59 Effective: December 5, 2003

Revision: December 3, 2012, May 30, 2013, March 12, 2014, September 18, 2015,

February 8, 2017 Page 1 of 4

1

4

5

6 7

8 9

10

11 12

13 14

15

16

17

18

SUBJECT: Intellectual Property

- 1. It is the responsibility of each member of the faculty, staff, and student body to be familiar with the LSU policies that pertain to intellectual property. These policies are set forth in the 2 most current edition of the Bylaws and Regulations and the Permanent Memoranda of the 3 Board of Supervisors of LSU. The following documents are especially relevant:
 - a) Part 2, Chapter VII of The Bylaws and Regulations (June 19, 2015): Intellectual Property
 - b) PM 15 dated March 25, 2002: Copyright Guidelines Regarding Electronic Learning

Also, the following documents contain information indirectly related to intellectual property:

- a) PM 11 dated May 12, 1993: Outside Employment of University Employees
- b) PM 67 dated October 6, 1997: 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 PS No. 59

Effective: December 5, 2003

Revision: December 3, 2012, May 30, 2013, March 12, 2014, September 18, 2015

Page 2 of 4

LSU Eunice Technology Disclosure Form

1. Title of Invention:						
2a. Inventor's Name* Dr	./Mr./Ms./					
	Last	First		Middle		
Position/Title:		rity:				
Current LSU Eunice Add	dress:					
	Department			Office		
Tel.:	Fax:	E-ma	il:			
Residence Address:						
	Street			Apt. No.		
City		State	Zip Co	ode		
2b. Inventor's Name* Dr						
	Last	Fir	st	Middle		
Position/Title:		Social Sec	urity #:			
Current LSU Eunice Add	dress:					
	Department		Office			
Tel.:	Fax:	E	-mail:			
Residence Address:						
St	reet		Apt. N	0.		
City		State	Zip Co	ode		
(IF MORE THA	AN TWO INVENTORS	, PLEASE ADD AI	DDITIONAL SHI	EETS)		
3. Please give details of the contract/ agreement.		ed to the invention	. If possible, atta	ach a copy of		
Federal (including pass thr	ough funds):		_ Contract No.: _			
State:			Contract No.:			
Industrial Company:			_ Contract No.: _			
LSU Eunice			Contract No.:			
Other Sponsors: * Tentative listing of inventor(s	s) subject to verification by p	patent counsel in acco	_ Contract No.: _ ordance with Federa	ıl law.		

LSU Eunice PS No. 59

Effective: December 5, 2003
Revision: December 3, 2012, May 30, 2013, March 12, 2014, September 18, 2015

Page 3 of 4

4a. Brief description of the invention and its advantages:
4b. Possible areas of commercial application of the invention:
5. Brief description of presently used technology and its disadvantages:

LSU Eunice PS No. 59

Effective: December 5, 2003

Revision: December 3, 2012, May 30, 2013, March 12, 2014, September 18, 2015

Page 4 of 4

6. Is any material used in this invention cov	ered by a materia	al transfer a	•	YES attach a copy	
7 Have you made a patent search or a liter (If	ature search? YES, attach copi			es you found	l.)
8. Is any information related to this disclosu	ure classified?	YES	NO (If YES	, attach detai	ls.)
9. Has the invention been reduced to pract tested or modeled)	ice? YES	NO (e	g, apparatus a	ssembled an	d
Are laboratory records and data available	e? YES	_ NO			
10. Have you made any public disclosure of	of the invention? _	YES _	NO		
If YES, please list details and EXACT dates journal or proceedings; a presentation or pe Eunice; a thesis or dissertation cataloged a Internet; etc.)	oster at a confere	nce; prepri	nts distributed	outside LSU	
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 in information/documentation and displayed on YES NO 12. Do you personally wish to take a License	copyright notices o	on the title	screen of your		NO
13. If you know of any firms who might be i following information: Company name:	nterested in licens	sing this te	chnology, atta	ch a list with	
Address:					
Contact person:			Telephone:		
Signature(s) of Inventor(s)					
	Date:				
	Date:				
Witness: (Note: A co-inventor should not be	e a witness.)				
Signature of Witness	Date:				