

WYOMING RESEARCH PRODUCTS CENTER INVENTION DISCLOSURE FORM*

**Note: For Use by Independent Wyoming Inventors*

1. TITLE OF INVENTION

2. DESCRIPTION OF INVENTION: In describing the technology, please provide information covering the following points:

Please Use Text Boxes for Describing Technology and/or Attach Additional Pages

General purpose:

Technical description:

Advantages & improvements over existing methods, devices, or materials:

Marketing opportunities or commercial applications:

3. INVENTOR(S) *(If more than 3 inventors, please download Additional Inventors Form)*

FIRST INVENTOR	<i>Name:</i>				
	<i>Phone:</i>		<i>Fax:</i>		
	<i>Email:</i>				
	<i>Address:</i>		<i>City:</i>	<i>State:</i>	<i>Zip:</i>

SECOND INVENTOR	<i>Name:</i>				
	<i>Phone:</i>		<i>Fax:</i>		
	<i>Email:</i>				
	<i>Address:</i>		<i>City:</i>	<i>State:</i>	<i>Zip:</i>

THIRD INVENTOR	<i>Name:</i>				
	<i>Phone:</i>		<i>Fax:</i>		
	<i>Email:</i>				
	<i>Address:</i>		<i>City:</i>	<i>State:</i>	<i>Zip:</i>

4. REDUCTION TO PRACTICE OR PROTOTYPE

Has the invention been reduced to practice or has an actual prototype been made? YES NO

5. BY SIGNING OR SUBMITTING THIS TECHNOLOGY DISCLOSURE, YOU INDICATE THAT YOU ARE USING THIS SERVICE AT YOUR OWN RISK. THE UNIVERSITY OF WYOMING, ITS EMPLOYEES, TRUSTEES, OFFICERS, STUDENTS, INTERNS AND CONSULTANTS EXTEND NO WARRANTIES AND ACCEPT NO LIABILITY BY PROVIDING INTELLECTUAL PROPERTY SERVICES TO INVENTORS. THE UNIVERSITY PRESERVES ITS CONTRACTUAL SOVEREIGN IMMUNITY.

6. SIGNATURES

<i>Inventor's Name:</i>	<i>Signature:</i>	<i>Date:</i>
<i>Inventor's Name:</i>	<i>Signature:</i>	<i>Date:</i>
<i>Inventor's Name:</i>	<i>Signature:</i>	<i>Date:</i>

Submit To: Wyoming Research Products Center, Dept. 3672, 1000 E. University Ave., Laramie, WY 82071