REQUEST TO WAIVE NORTHWESTERN UNIVERSITY’S RIGHTS FOR WORK CONDUCTED BY STUDENTS AS PART OF A CLASS, INTERNSHIP OR INDEPENDENTLY WITH OR WITHOUT SUPERVISION FROM AN INSTRUCTOR

1. Title of Invention:

____________________________________________________

2. Date of conception or/reduction to practice: ______________

3. Description of Invention:

Please attach a detailed description of this invention to this form.

4. Has the description of the invention been published or presented in a public forum?

Yes _____

No _____

5. Will the invention be published or presented in a public forum?

Projected Date _____

6. Do any of the inventors conduct research with any other member of the Northwestern University community?

Yes __

Please specify what other research the inventor is involved with.
Provide name of faculty member and Departments.

____________________________________________________

____________________________________________________

No ___
7. List all of the Northwestern facilities used for this invention. Please exclude The Garage, library services and meeting places.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

8. List sources of funding (Northwestern’s or other) used to develop the invention including salaries, research assistantships, scholarships, etc.

__________________________________________________________________________

__________________________________________________________________________

9. If applicable, list commercialization partners to whom student wants to assign rights, including name of future patent owner and other IP, if any, that is affected.

__________________________________________________________________________

__________________________________________________________________________
The undersigned know(s) of no commitment, such as to an industrial, government, and foundation sponsor or to any additional individual or entity.

The undersigned understands that, if this request is granted, Northwestern University will:

a) Make no claim to this invention.
b) Not be responsible for any of the costs associated with this invention
c) Not provide legal representation to the inventor in case of litigation

In addition, the undersigned understands that if this technology is reduced to practice or otherwise further developed by any of the undersigned making significant use of Northwestern University-administered funds or facilities, Northwestern University has the rights to assert its rights in accordance with Northwestern University policies.

PLEASE LIST ALL STUDENTS/INVENTORS/AUTHORS:

Inventor Signature: ________________________________
Name (print): ________________________________
Date: ________________________________
Address: ________________________________
Phone: ________________________________
Email: ________________________________

Inventor Signature: ________________________________
Name (print): ________________________________
Date: ________________________________
Address: ________________________________
Phone: ________________________________
Email: ________________________________
Student Petition to Release IP – FORM A

Inventor Signature: __________________________________________

Name (print): ______________________________________________

Date: ______________________________________________________

Address: __________________________________________________

Phone: _____________________________________________________

Email: _____________________________________________________

________________________________________________________________

Graduate Thesis Advisor, Faculty Instructor, or Department Head endorsement of this request

I have reviewed this invention with the inventors and am familiar with the circumstances of its development. I have read and specifically confirm to the best of my knowledge the veracity of the assertion set forth in this form.

Graduate Thesis Advisor/Faculty Instructor/Department Head Signature: __________________________________________ Date: __________

Signature

________________________________________________________________

Print name

Submit form with all signatures to: Northwestern University
Innovation and New Ventures Office
1800 Sherman Ave, Suite 504
Evanston, IL 60201
Attn: Student Inventions
invo@northwestern.edu
Fax: 847-491-3625
Phone: 847-467-2097

If granted, waiver letters will be sent to all inventors within 30 days after receipt of a completed petition.