Student Petition to Release IP - FORM A

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/and 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	า?
	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 Northwest University community?	err
	Yes	
	Please specify what other research the inventor is involved with. Provide name of faculty member and Departments.	
	No	

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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		

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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:	

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Inventor Signature:	
Name (print):	
Date:	
Address:	
Phone:	
Email:	
Graduate Thesis Advisor, Faculty Instructor, request I have reviewed this invention with the inventor of its development. I have read and specifical veracity of the assertion set forth in this form.	ors and am familiar with the circumstances lly confirm to the best of my knowledge the
Graduate Thesis Advisor/Faculty Instructor/D	
	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.