## UTH_2c+uthsch_hor_lrg.png

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**OFFICE OF TECHNOLOGY MANAGEMENT  
 COPYRIGHTABLE MATERIAL DISCLOSURE**

**1. TITLE OF COPYRIGHTABLE MATERIAL (“Work”):**

-If the material is only appropriate for school-aged children of a certain year(s), certain grade level(s), or both, please so indicate in the title.

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| **2. CREATOR(S) INFORMATION:** Please list the full name of UTHealth employees or students and any non-UTHealth personnel who have directly contributed to the creation of the material to any degree. Note also if any such person holds a joint appointment with any other university, a company, or governmental agency or the like. **All fields in this section 2 for each Creator must be completely filled out** (Home address, Home Phone, and Personal email information will only be used by our office in event your work contact information changes). **Please do NOT use ChatGPT or any other AI tool to fill out this form or in the creation of the technology—see more information in Section 4(q) below!** |

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| Name: |  | | | Employer: | UTHealth  Other (Name): | | |
| Year of Birth: |  | | | Date of Death (if applicable) | |  | |
| School: | McGovern Nursing SBMI  GSBS  Dental SPH | | | % Time Employed by UTHealth | | % | |
| Title: |  | | | % Time Employed by Other | | % | |
| Department: |  | | | Other Appointment | None  Clayton   Other: | | |
| Work Address: |  | | | Home Address: |  | | |
| Work Phone: |  | | | Home Phone: |  | | Citizenship: |
| Work Email: |  | | | Personal Email: |  | | |
| % Contribution: | % | | **Note: OTM should be informed of any changes to the above information** | | | | |
| Describe this individual’s contribution: | |  | | | | | |

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| Work Address: |  | | | Home Address: |  | | |
| Work Phone: |  | | | Home Phone: |  | | Citizenship: |
| Work Email: |  | | | Personal Email**:** |  | | |
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| Describe this individual’s contribution: | |  | | | | | |
| If necessary, please attach an Additional Creator Addendum to include more co-creators (form can be found [here](http://www.uth.tmc.edu/otm/for-inventors/instructions.html)).  **Name of Creator (from above) that should be the principal contact person:**  Have non-UTHealth contributors listed above made disclosure to their respective employer? Yes No  N/A | | | | | | | |

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| **3.  FUNDING SOURCE:** | | | |
| **Was any government funding used in the creation of the Work?**  Yes  No  ***Complete and accurate funding source information is necessary for UTHealth to comply with mandatory reporting requirements.* Please list all sources:** | | | |
| Federal Funds | Percent:      % | Name: |  |
| Grant #: |  |
| UTHealth Funds (Endowment, Departmental, Startup Funds, Gifts, etc.) | Percent:       % | Name: |  |
| State Funds (TEA, CPRIT, ETF, TIF, TWC)  If TEA funds used, please list contact person at TEA | Percent:       % | Name: |  |
| Other Institutions | Percent:       % | Name: |  |
| Other Sources (Sponsored Research, Foundations, etc.) | Percent:       % | Name: |  |
| Contract #: |  |

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| **4. SUMMARY & DEVELOPMENT OF THE WORK:** |
| (a) How would you characterize the Work? (i.e. a text, manual, motion picture, screen play, photo, software, etc.):  (b) Has the Work previously been copyrighted (i.e. is the new Work a more “updated” version, derivative, or a new edition)? Yes  No  If yes: please briefly explain the differences, improvements, or material that has been added to this Work:  please list the title of the previous work:  please list the author(s) of the previous work:  please list the copyright registration number:  please list the date in which copyright registration was granted:  (c) Is the work a derivative or compilation of any other work(s)? (whether or not copyrighted or authored by Creators of this Work)  Yes  No  If yes: please identify any preexisting work(s) that this Work is based on or incorporates:  please list the title of the pre-existing work:  please list the owner of the pre-existing work:  (d) Was any part of the Work developed as a “work-for-hire”? (A work-for-hire is a work created by an employee within the scope of employment or a work created by a contractor pursuant to a signed contract that explicitly characterizes the word as work-for-hire): Yes No  Uncertain  If Yes, or if you are uncertain, please explain: |
| (e) Please list the Day, Month, and Year of publication of the Work:  (f) Please list the nation where the Work was published:  (g) Do you anticipate subsequent versions of the Work? Yes No  (h) Do you anticipate producing the Work in any other form (i.e. web based, video, audio, screen play, etc.) Yes No  If Yes, how?  (i) Is the Work to be used in conjunction with any other material?  If Yes: What material?  Has the material already been created? Yes No  If Yes: Has the material previously been copyrighted? Yes  No  Do you or anyone else plan to register a copyright in that material as well? Yes  No  (j) Was any of this work performed at UTHealth? Yes  No  (k) Was any of this work performed at another university, institution or company? Yes  No  (l) Were any of the following used in the development of the Work:  UTHealth personnel, including yourself: Yes  No  UTHealth Facilities or Technical Support: (Laboratories, offices, etc.) Yes  No  UTHealth Equipment: (tools, computers, machinery, etc.) Yes  No  UTHealth Materials: (Supplies, etc.; if scrap, waste, or salvage materials were used, give estimated value of materials.)  Yes  No  Estimated dollar value: $  (m) Estimated amount of UTHealth funds, other than salaries and wages, which were actually obligated or expended for the purpose of making the Work: $  (n) Contribution of time or services of other UTHealth employees: Yes  No  If Yes, (state approximate number of hours and type of assistance):  (o) Were any of the contributors under a work-for-hire agreement? Yes  No  If Yes, please state name of individuals and submit a copy of the work-for-hire agreement with this form:    (p) Are any images included in the work? Yes  No  If Yes, are the images original creations or were they obtained from an image library or other outside source?  100% original images  Not 100% original images  and the source of the images is:  (q) Have you used any generative AI in this technology or in the creation of this report? (i.e. ChatGPT, etc.) Yes  No  If yes, please describe use:  *(please note: Though generative AIs are a useful tool in many ways, intellectual property, especially patents and trade secrets, possess strict rules concerning public disclosure and inventorship/creatorship. Inventors/creators and employees of UTHealth must not input ideas for new inventions, proprietary information, or other confidential information into any generative AI programs at this time, nor should they use generative AI systems to assist in the preparation or review of preliminary patent drafts or invention disclosures. Use of generative AI and the input of this type of information may be considered a public disclosure and could limit or bar patent rights.)* |

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| **5. COMMERCIALIZATION:** |
| What is the value of the Work/the commercial possibilities? |
| Who are potential licensees, especially any companies that may have a particular interest in the Work and in what manner they might commercialize it? Have you been in contact with any people or companies about this Work? |

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| **6. COPYRIGHT PERMISSION:** | |
| **(a) If any part of your Work is not original, you must obtain permission to use the borrowed work from the owner of the work (this may be different from the author). Please attach a copy of all signed permission forms to this disclosure along with a description of the borrowed work. You must obtain permission to use the work even if the work is not registered with the Copyright Office.**  To obtain a permission form/letter or for more information please visit:  <http://www.utsystem.edu/ogc/intellectualproperty/permissn.htm>  (b) To request permission to reprint a text passage or image from a University of Texas Press book please visit:  <http://www.utexas.edu/utpress/about/bpermission.html>  (c) To request permission to use information technology services material please visit:  <http://www.utexas.edu/its/forms/permissions.html> |

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| **7.**  **MULTIPLE COPIES AND DEPOSIT REQUIREMENT :** |
| (a) Please submit either (i) one digital copy of the Work or (ii)at least **four** copies of the Work, along with this form to OTM. Please make sure the Work is in the best form possible (i.e. the form in which you expect to publish or distribute it). The copies may include:  i. Color copies  ii. Current and up- to- date trademarks  iii. Videos  iv. Bound copies  v. Etc.  \* For works first published on and after March 1, 1989, use of the copyright notice is optional.  (b) If the Work is used for a specific year or grade level, please make sure this is evident on the cover of the Work.  (c) OTM may request additional required deposit material of the Work.  Depending on the type of work to be registered, OTM may request additional information, particularly where actual submission of the Work to the copyright office is impractical. |

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| **8. SIGNATURES:** |
| **I understand and agree that financial consideration from commercialization, if any, will be distributed pursuant to the University of Texas Health Science Center at Houston Intellectual Property Policy (“Policy”) and that the “percent contribution” listed in Section 2 for each Creator are the percentages to be used in allocating the Creator’s portion of any financial consideration received, unless otherwise agreed upon separately in writing by all Creators**.  **As partial consideration for The University of Texas Health Science Center at Houston (“University”) commercializing the Work, I hereby do assign all of my rights in this Work to the University, and I agree to execute all papers and perform such other acts as may be reasonably necessary to give the University, its successors, and assigns, the full benefit of this assignment. By signing below, I represent that all Creators of the Work have been identified and the Work is entirely original or I have attached the appropriate permission form(s) from the owner(s) of the borrowed material.**  **ALL UTHEALTH CREATORS LISTED ABOVE MUST SIGN THIS REPORT.**   |  |  |  | | --- | --- | --- | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Printed Name: | Date: \_\_\_\_\_\_\_\_\_\_ |   **If necessary, please attach an Additional Creator Addendum to include more co-creators. An Additional Creator Form can be found** [**here**](http://www.uth.tmc.edu/otm/for-inventors/instructions.html)**.** |

**Please return the original signed report along with any additional attachments that might further explain the discovery (e.g.. manuscripts, reprints, related publications, etc.) to:**

**The Office of Technology Management: UCT 1400**

**Phone 713.500.3369 Fax 713.500.0331** [**otm@uth.tmc.edu**](mailto:uthsch-otm@uth.tmc.edu)