

**MACHAKOS UNIVERSITY**  
**OFFICE OF THE DEPUTY VICE-CHANCELLOR**  
**(RESEARCH, INNOVATION AND LINKAGES)**

**STAFF INNOVATION DISCLOSURE FORM**

**1. Title of Innovation/Project:**

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**2. Principal Innovator/inventor**

Name (Contact Person):		School:
Department:		Registration No:
Inventorship share (%):		Telephone:
Signature:		Email:

**3. Co-Innovators/Inventor(s)**

**Co-Innovator/Inventor - 1**

Name:		School:
Department:		Registration No.:
Inventorship share (%):		Telephone:
Signature:		Email:



**Co-Innovator/Inventor - 2**

Name:		School:
Department:		Registration No.:
Inventorship share (%):		Telephone:
Signature:		Email:

**Co-Innovator/Inventor - 3**

Name (Person to whom inquiries should be made):		School:
Department:		Registration No.:
Inventorship share (%):		Telephone:
Signature:		Email:

Note to Principal Innovator/Inventor: For more Co-innovators/inventors, please add separate sheet.

**4. Summary Description of Innovation/Invention (Enclose sketches, drawings, photographs, screen prints and other materials to help illustrate the description).**

(Please use additional sheet if necessary)


**5. General Purpose of Innovation/invention**


**6. Commercial Application of Innovation/invention**


**8. A) Advantages and Unique Features of innovation/Invention**

i. Please identify the novel and unique features of the innovation/invention.


ii. How does it differ from the existing technology?


iii. What problem does it solve or what advantages does it possess?


**B) Alternate Technologies**

Describe alternate technologies/products which you are aware of accomplishing the same purpose as this invention, along with the companies that market, manufacture or make use of them.


**8. Do you have any Plans to patent? If yes, when?**


**9. Innovation/Invention History**

ITEM	DATE	Place, Reference, Comments
A – Initial idea		
B – Description of complete invention, oral or written		
C – First successful demonstration (reduction to Practice)		
D- First publication (article, theses, oral presentation, abstracts, poster)		
E – Disclosures to industry		
F- Other disclosures		
G- Is it related to other inventions?		
H- Are your lab books and other records in order and available?		

## 10. Proposed Budget

Please provide possible budget towards the costs of your proposed innovation/project

## 11. Endorsement and signatures

a) Principal Applicant

I, \_\_\_\_\_ (Principal Inventor), acknowledge that to the best of my Knowledge there are no other co-inventors to this invention.

\_\_\_\_\_

Signature of Principal Investigator

b) Mentor/Supervisor Department of \_\_\_\_\_

Name of Mentor/supervisor: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

c) Chairperson, Department of \_\_\_\_\_

Name of Chairman: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

d) Dean, School of \_\_\_\_\_

Name of Dean: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

