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**TECHNOLOGY TRANSFER OFFICE (TTO)**

**INTELLECTUAL PROPERTY (IP) CONTRIBUTORS FORM**

In accordance with theIntellectual Property (IP) Policy of the Central University of Technology, a portion of the revenues received from the commercialisation of intellectual property will be distributed to the IP creators in accordance with their relative contributions unless another agreement has been reached by written agreement. A further portion of the revenues will be distributed to the IP creator’s respective department, research group, unit, institute or centre.

This form is to be used by CUT members to identify all persons that have contributed or enabled the development of IP and their respective affiliations, i.e. Organisation, Unit, Group, Centre. The relative contributions of each person and unit must be quantified as accurately as possible to ensure equitable sharing of any benefits that may accrue from the commercialisation of the IP in future. The IP creators and IP enablers are defined as:

**IP Creators** - individuals who are deemed to have made an intellectual contribution to the creation and/or development of the IP arising from the research and development (R&D). These do not include individuals that have only carried out tasks under instruction. IP Creators are not necessarily those appearing as authors on a scientific publication. To be legally recognised as a co-creator or co-inventor, one must have conceived an essential element of the creation/invention or contributed substantially to the concept.

**IP Enablers** – individuals (assistants, technicians etc.) who made no intellectual contribution to the invention/creation, but made some other material contribution to enable the invention/creation and who, by agreement, must share in the benefits derived from it.

**IMPORTANT:**

1. On the next page, please classify yourself as either a Creator/Inventor or Enabler of the IP in accordance with the above definitions.
2. This declaration will determine the sharing of the IP Creator(s)/Enabler(s)’s and Unit’s portions of revenues that may accrue from the commercialisation of the IP in future. Any changes to these contributions and additional parties must be subject to a new agreement.
3. By signing this form, you undertake to give your full cooperation in the commercialisation of the IP.
4. Please note that it is the responsibility of the IP Creator(s)/Enabler(s) to notify the Technology Transfer Office (TTO) of any changes in their contact details for the distribution of income that may arise from this IP, particularly should you no longer be an employee of CUT.

**Please return completed form to:** Central University of Technology Innovation Services (CUTis), Corner Victoria Rd & Kolbe Ave, Bloemfontein, Email: [ivanzyl@cut.ac.za](mailto:ivanzyl@cut.ac.za), Tel: 051 507 4339

The creators/inventors of the following invention [*insert Invention Title*], do hereby agree to the following distribution of the portion due to the IP creators:

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Names** | **Institutional Affiliation** | **(Creator/ Enabler)** | **Percentage**  **Contribution (%)** |
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|  |  |  |  |

\*Add more rows if necessary

and the following distribution of the portion due to the Unit(s), Group(s) or Centre(s):

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution/ Organization** | **Unit/Group/ Centre** | **Nature of Contribution** | **Percentage**  **Contribution (%)** |
|  |  |  |  |
|  |  |  |  |
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\*Add more rows if necessary

**Declaration**

I, the undersigned confirm that I accept the intellectual property share recorded above and acknowledge that these percentages will be used to apportion any future revenue that may accrue to the CUT inventors/creators, in terms of the CUT IP Policy, from any commercialisation of this invention/creation. I also understand that if an additional valid inventor claimant is identified in the future, the existing inventor shares will be diluted accordingly.

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Creator/Enabler Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Creator/Enabler Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Creator/Enabler Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Creator/Enabler Date

**CONTRIBUTORS PERSONAL DETAILS**

All creators and enablers of the invention must provide their complete and latest personal and employment details. If not an employee of CUT, indicate as such and provide full details as well. Please notify the TTO of any changes in address and contact details, particularly should you no longer be an employee of CUT.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Creator / Enabler** | | | | | |
| Full name  (as displayed on ID or Passport) |  | | | | |
| **Creator** | ☐ | **Percentage Contribution** | \_\_\_\_\_\_% | **Enabler** | ☐ |
| Brief Description of Nature of Contribution |  | | | | |
| **Contact Details:** | | | | | |
| Telephone number |  | | | | |
| Email address |  | | | | |
| Physical Address |  | | | | |
| Signature |  | | | | |
| **Employment Details:** | | | | | |
| Position at CUT |  | | | | |
| Faculty & Department |  | | | | |
| Unit |  | | | | |
| Staff Number |  | | | | |
| 1. **Creator / Enabler** | | | | | |
| Full name  (as displayed on ID or Passport) |  | | | | |
| **Creator** | ☐ | **Percentage Contribution** | \_\_\_\_\_\_% | **Enabler** | ☐ |
| Brief Description of Nature of Contribution |  | | | | |
| **Contact Details:** | | | | | |
| Telephone number |  | | | | |
| Email address |  | | | | |
| Physical Address |  | | | | |
| Signature |  | | | | |
| **Employment Details:** | | | | | |
| Position at CUT |  | | | | |
| Faculty & Department |  | | | | |
| Unit |  | | | | |
| Staff Number |  | | | | |

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| Telephone number |  | | | | |
| Email address |  | | | | |
| Physical Address |  | | | | |
| Signature |  | | | | |
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| Faculty & Department |  | | | | |
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| Staff Number |  | | | | |
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| **Creator** | ☐ | **Percentage Contribution** | \_\_\_\_\_\_% | **Enabler** | ☐ |
| Brief Description of Nature of Contribution |  | | | | |
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| Telephone number |  | | | | |
| Email address |  | | | | |
| Physical Address |  | | | | |
| Signature |  | | | | |
| **Employment Details:** | | | | | |
| Position at CUT |  | | | | |
| Faculty & Department |  | | | | |
| Unit |  | | | | |
| Staff Number |  | | | | |

**The following sections must be signed by your Departmental Head and Dean.**

1. **Completed by the Departmental Head/Director**

*"I recommend that this invention/creation be exploited commercially.”*

|  |  |  |
| --- | --- | --- |
| Name: |  |  |
| **Head of Department/Director** | **Signature** | **Date** |

1. **Completed by the Dean**

*"I recommend that this invention/creation be exploited commercially.”*

|  |  |  |
| --- | --- | --- |
| Name: |  |  |
| **Dean** | **Signature** | **Date** |