STRAGE INNOVATION AWARD

STATEMENT OF ORIGINALITY AND SOURCE OF IDEA (SOSI)

Please fill in, sign and submit this form to Jasmine Jones jjones3@wpi.edu
This form will be viewed by competition administrators only

Check all that apply to your idea:

_____ Product  _____ Ideas of Basis of IQP  _____ Idea Will Solve a Social Problem

_____ Service  _____ Ideas of Basis of MQP

Briefly describe the idea. Provide enough detail of what it is and who can use it. Do not disclose information you want protected until a later time. Use back of form if needed.

When was this idea conceived? Date: ______________________________

Where was the idea conceived? Location: ______________________________

Were WPI resources (i.e., laboratories) used to develop the idea? Yes _____ No _____

Is there a WPI stake or interest?

If you are not sure, please consult with WPI’s intellectual property director, Todd Keiller, 508-831-4907, tkeiller@wpi.edu.

_____ Yes, there is a WPI Stake or Interest

_____ No, there is not a WPI stake or Interest

Who, besides you or your team, is aware of this idea?

List names and affiliation to you. (i.e. Attorney Jane Doe; Jack Sparrow, advisor; Mic Mouse, friend) Use back of form if needed.

1. ____________________________

2. ____________________________

3. ____________________________

4. ____________________________

5. ____________________________

6. ____________________________

7. ____________________________

8. ____________________________

By signing this form, you and/or team members believe the above information to be true; you and/or team members claim the idea is not someone else’s; and for products, processes, and materials you have found that the idea is are not infringing on an existing patent. Use back of form if needed.

Name: ____________________________    Signature: ____________________________

Name: ____________________________    Signature: ____________________________

Name: ____________________________    Signature: ____________________________

Name: ____________________________    Signature: ____________________________

Name: ____________________________    Signature: ____________________________