



**Patent Agreement  
For EPA Permanent, Part-Time / Adjunct Faculty and Staff**

<b>Name</b>	<b>Casual Name (ex. Bob, Kathy, etc.)</b>	<b>Last 4 digits of SSN</b>
<b>Department or Office Name</b>		<b>Title / Position</b>

In consideration of my appointment to the faculty/staff of the University of North Carolina at Charlotte, and as a condition of that appointment, I do hereby agree as follows:

1. I have read and understand the **Institutional Patent and Copyright Procedures** of the University of North Carolina at Charlotte (\*University Policy Statement #301: *Patent Policy*)
2. I agree to abide by the *Patent Policy* and to communicate promptly to the UNC Charlotte Office of Research a full and complete disclosure of all inventions conceived or reduced to practice by me in connection with my duties supported in whole or part by UNC Charlotte.
3. I further agree that I will assign the inventions and all applications and patents relating thereto to UNC Charlotte, a sponsor, or the federal government as and when requested by UNC Charlotte.
4. I understand that unless otherwise specifically agreed in writing I shall receive my share of the gross revenues from the licensing or sale of my invention in accordance with the revenue distribution formula set forth under the *Patent Policy*.
5. I understand that UNC Charlotte will rely upon this Agreement in making research and licensing agreements with third parties.

This Agreement shall not apply to any invention which does not come within the scope of UNC Charlotte ownership as defined in the *Patent Policy*.

<b>Signature</b>	<b>Date</b>

\* University Policy Statement #7: Patent Policy can be found online at: <http://legal.uncc.edu/policies/up-301>.