

## EMPLOYMENT



### Intellectual Property Agreement

In consideration of my employment by the Board of Regents of the University System of Georgia ("Board of Regents"), I agree to comply with the University of Georgia Intellectual Property Policy ("Policy") and any future amendments to it.

When required by the Policy to do so, I agree to promptly disclose in writing to the University of Georgia Research Foundation, Inc. ("UGARF") all Intellectual Property that I conceive, invent, author, reduce to practice or develop, either alone or jointly with others, during the term of my employment, and to make and maintain adequate and current records thereof.

I understand and agree that the ownership of all Intellectual Property, as that term is defined in the Policy, developed by me in the scope of my employment shall be determined by the Policy.

At UGARF's request, I agree to assist UGARF in any way it deems necessary to obtain, enforce and commercialize such Intellectual Property. Assistance may include, but is not limited to, preparation of documents and delivery of written records and materials. During and after the term of my employment, I agree to sign any assignment, affidavit or other document that UGARF may require with respect to perfecting UGARF's legal rights in Intellectual Property.

Upon termination of my employment for any reason, I agree to promptly turn over to UGARF all tangible property in my possession or under my control relating to Intellectual Property. Such tangible property may include but is not limited to biological and chemical materials, models, prototypes, drawings, records, documents, and the like. I acknowledge that all such items are the sole property of the Board of Regents.

Discharge of my responsibilities in this Agreement shall be an obligation of my executors, administrators or other legal representatives or assigns.

I have read the Policy<sup>1</sup> and have carefully considered its terms and this Agreement before signing below. If I have any questions relating to this Agreement or my obligations under it, I understand that it is my responsibility to obtain answers or assistance before signing it.

|                      |                      |                      |                      |                   |
|----------------------|----------------------|----------------------|----------------------|-------------------|
| _____                | <input type="text"/> | <input type="text"/> | <input type="text"/> | _____             |
| Signature            | First name           | MI                   | Last name            | Social Security # |
| _____                | _____                |                      | _____                | _____             |
| Title                | Department           |                      | Date                 |                   |
| _____                | _____                |                      |                      |                   |
| Signature of witness | Address of witness   |                      |                      |                   |

<sup>1</sup> See [http://www.ovpr.uga.edu/policies/rph\\_chp2.html#policyofuga](http://www.ovpr.uga.edu/policies/rph_chp2.html#policyofuga), or contact the Technology Commercialization Office at 706-542-5944 to obtain a paper copy.