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| **Project Title:** | | |  | | | | | | **OUI Project No:** | | |  | |
| **OUI Technology Transfer Manager:** | | |  | | | | | | | | | | |
| **Researcher name (s):** | | |  | | | | | | | | | | |
| **Department (s):** | | |  | | | | | | | | | | |
| **Correspondence Address:** | | |  | | | | | | | | | | |
| **Email address:** | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Funding sources** | | | **Total value of project:** | | | | | | **£** | | | | |
| **Value requested from UCSF** | | | | | | **£** | | | | |
| **Project Dates:** | | | ***[Start date]* Make sure this is a realistic time frame** | | | | | | ***[End date]*** | | | | |
| **Project Stage:** *(delete as appropriate)* | | | **Initial proof of concept** | | **Pre-patent research** | | **Reduction to practice** | | | | **Commercial demonstration** | | |
|  | | |  | | | | | |  | | | | |
| **Brief description of technology/invention** *(100 words)* | | | | | | | | | | | | | |
| **Why is it novel?**  **Is there a market for it?**  **What is it now and what is it going to be?** | | | | | | | | | | | | | |
| **Market opportunity and industrial engagement** *(200 words)*  *(include information relating to gaps in market, market size, customer interaction, possible route to market (e.g. license))* | | | | | | | | | | | | | |
| **We are looking for:**  **- an understanding of the market opportunity: how big is the market and what is your potential market share realistically?**  **- a clear route to market, preferably facilitated by UCSF** | | | | | | | | | | | | | |
| **Innovation of the science** *(200 words)*  *(What is it, how does it work, why is it novel?)* | | | | | | | | | | | | | |
| **Please use terms suitable for an educated layman**  **Explain what is already state of the art and how your science differentiates itself focusing on the commercial potential of the science** | | | | | | | | | | | | | |
| **IP position** *(150 words)*  *(include views of patent agents and/or OUI regarding prior art searches, patent/ competition landscape, patentability)* | | | | | | | | | | | | | |
| **Please give clear details of all intellectual property including copyright, trademark, trade secret or potential thereof** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Project plan** *(please add additional rows where necessary)* | | | | | | | | | | | | | |
| **Task breakdown** | **Description** | | | | | | | **Start date** | | **End date** | | | **Cost** |
| **Work Package 1** | **Make sure Work Packages enable a clear progression from one Project Stage to the next** | | | | | | |  | |  | | | **£** |
| Sub-task 1a | **Work Packages should show realistic timescales and budget** | | | | | | |  | |  | | | **£** |
| Sub-task 1b | **Make sure the Cost tallies with the value of the project!** | | | | | | |  | |  | | | **£** |
| **Work Package 2** |  | | | | | | |  | |  | | | **£** |
| Sub-task 2a |  | | | | | | |  | |  | | | **£** |
| Sub-task 2b |  | | | | | | |  | |  | | | **£** |
| **Work Package 3** |  | | | | | | |  | |  | | | **£** |
| Sub-task 3a |  | | | | | | |  | |  | | | **£** |
| Sub-task 3b |  | | | | | | |  | |  | | | **£** |
|  | | | | | | | | | | | | | |
| **Project deliverables**: *(what you hope to achieve) (100 words)* | | | | | | | | | | | | | |
| **Brief description of deliverable** | | | | | | | | | | | | | |
| **Work Package 1** |  | | | | | | | | | | | | |
| **Work Package 2** |  | | | | | | | | | | | | |
| **Work Package 3** |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Background to research group/ management team** *(200 words)* | | | | | | | | | | | | | |
| **Only include people that are necessary to the project. Highlight anyone whose salary will need to be paid from the fund. Include details on length of contract and ability to spend time working on the project** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| *N.B. UCSF / OIF projects within the University are relatively short term and small scale and are treated as incremental activity for Departments. They must be costed on a marginal basis and only additional costs to the University will be granted by the funds. Thus there are no indirect costs to be added to the direct costs you identify below.* | | | | | | | | | | | | | |
| **Item** | | **Amount (£)** | | | | **\* Please provide details.** NB include VAT for any external purchases or bought-in services. | | | | | | | |
| **UCSF** | | **Match** | |
| **Salaries** *(incl employer’s costs)* | |  | |  | | **Include name of person whose salary will be paid** | | | | | | | |
| **Consumables\*** | |  | |  | |  | | | | | | | |
| **Equipment\*** | |  | |  | |  | | | | | | | |
| **Computer Hardware\*** | |  | |  | |  | | | | | | | |
| **Computer Software\*** | |  | |  | |  | | | | | | | |
| **Bought-in services\*** | |  | |  | | **These should not be the sole purpose of the fund** | | | | | | | |
| **Other\*** | |  | |  | |  | | | | | | | |
| **Sub-total** | |  | |  | |  | | | | | | | |
| **TOTAL (UCSF + Other sources)** | | **£ Make sure the Cost tallies with the value of the project!** | | | | | | | | | | | |
| **CONTRIBUTIONS FROM MATCH SOURCES** *(Detail source of contributions and their value as appropriate)* | | | | | | | | | | | | | |
| **SOURCE** | | **TYPE**  *Grant/ in kind?* | | | | **AMOUNT** | | | | | | | |
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| **Please explain why the UCSF/OIF is the most appropriate funding source for this project.**  *Please indicate why other sources of funding cannot be used e.g. IAA, MRC CiC, OSI. (100 words)* | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Next steps after UCSF funding:** *(100 words)*  *(e.g. license technology, further research, form company)* | | | | | | | | | | | | | |
| **We want to see that the UCSF is helping get the project from stage to the next. Preferably from a position where it is only eligible for this sort of funding to where it will be attractive for other sources of investment.** | | | | | | | | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **Form completed by:**  *(Researcher)* | *(sign and print name)* | **Date:** |  | | **Application authorised by:**  *(Head/Administrator of Department(s) to which funds will be paid)* |  | **Date:** |  | | **Cost Centre:** |  | | | | **Approved for payment by:**  *(for the University)* |  | **Date:** |  | | **Recommended to the University by:**  *(for the UCSF/ OIF Investment Advisory Committee)* |  | **Date:** |  | | | | | | | | | | | | | | |