

Intent to Invent

Date _____

Student Inventor _____
(Last name) (First name)

Grade Level _____ Teacher(s) _____

School _____ School Telephone _____

City _____ State _____ ZIP _____

I, _____, intend to invent _____

A brief description: _____

I have determined to the best of my ability that my invention will be original by taking the following steps.

I will be using the following materials in my invention.

I will practice science safety rules at all times.

Student's signature