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|  | **Technology Disclosure Form****Office of Technology Management****113 Technology Center, University Park, PA 16802814.865.6277 ▪ otminfo@psu.edu** | Disclosure Number(*OTM Use Only*) |
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**The completed form, *along with a* *detailed description of the technology*, should be emailed to the OTM (****OTMinfo@psu.edu****). Please attempt to *complete the form in its entirety*,\* but if you have any questions, please *call our office* (814.865.6277).**

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| **1. Title of Technology (brief but descriptive):** |
| Enter title here |
| **2. Technology Inventors/Contributors (list primary contact first – if more than 5, continue on pg. 3, section S1):** |
|  | Full Legal Name | Work Email Address | Title (e.g., Professor, Grad Student, or Undergrad) | Primary College | Primary Department |
| **A** |   |   |   |   |   |
| **B** |   |   |   |   |   |
| **C** |   |   |   |   |   |
| **D** |   |   |   |   |   |
| **E** |   |   |   |   |   |
| *For reporting purposes, are any of the technology inventors/contributors female?* | Yes |[ ]  No |[ ]
| **3. Is this technology the result of sponsored research (i.e., government or industry)?****Important: If you will report this technology to a sponsor, you must list the sponsor here.** | Yes |[ ]  No |[ ]
| Sponsor | Grant or Contract # | Principal Investigator |
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|   |   |   |
| **4. Are there any other agreements pertaining to this technology (i.e., material transfer agreements, consulting agreements, confidentiality agreements, etc.)?** | Yes |[ ]  No |[ ]
| Agreement Type | Name of Other Party | Institution Contact |
|   |   |   |
|   |   |   |
|   |   |   |
| **5. Public Disclosures (any publicly available and potentially enabling disclosures of the technology):****Public disclosure immediately prevents us from obtaining most foreign patent rights and may also impact our ability to obtain US patent rights. As such, please try to contact OTM before publicly disclosing your technology so we can consider protection strategies. However, even if you have publicly disclosed your technology, please complete and submit this form.** |
| Has the technology been disclosed to anyone (e.g., published in a journal, thesis, or abstract; presented as a poster or orally at a conference or invited talk; discussed with colleagues, etc.)? | Yes |[ ]  No |[ ]
| If yes, please provide below the dates of all disclosures and describe their nature (e.g., publication, presentation, discussion, etc.). |
|   |
| If no, please provide below your plans for disclosure (e.g., publication in a journal, thesis, or abstract; presentation as a poster or orally at a conference or invited talk; discussion with colleagues, etc.). **If a disclosure is anticipated within the next 14 days, please call our office as soon as possible so we can consider appropriate protection strategies.** |
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| **6. Please provide a brief summary of the technology (no need to use all the space provided below).** |
|   |
| **7. Please briefly describe the problem that the technology solves and how it is different from similar technologies. Describe how the invention might be used in a commercial setting (i.e., what would a product, method, or service look like, who would be the most likely end user, etc.) and how it is unique/improved over existing products/methods (no need to use all the space provided below).** |
|   |
| **8. If available, please provide a detailed description of the technology (often a manuscript draft, grant proposal, or similar will suffice) when submitting the completed form.** |

**The completed form, *along with a* *detailed description of the technology*, should be emailed to the OTM (****OTMinfo@psu.edu****). Please attempt to *complete the form in its entirety*,\* but if you have any questions, please *call our office* (814.865.6277).**

**\*Note: Sections S1 and S2 on the following page are provided for supplementary information and do not need to be completed if not applicable.**

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| **S1. Additional Technology Inventors/Contributors (continued from pg. 1, section 2):** |
|  | Full Legal Name | Work Email Address | Title (e.g., Professor, Grad Student, or Undergrad) | Primary College | Primary Department |
| **F** |   |   |   |   |   |
| **G** |   |   |   |   |   |
| **H** |   |   |   |   |   |
| **I** |   |   |   |   |   |
| **J** |   |   |   |   |   |
| **K** |   |   |   |   |   |
| **L** |   |   |   |   |   |
| **S2. Additional Information (can be used to convey anything not covered in preceding sections).** |
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