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|  | **Technology Disclosure Form****Office of Technology Management****Barron Innovation Hub, 123 S. Burrowes Street, Suite 311 State College, PA 16801814.865.6277 ▪ 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** **OTMinfo@psu.edu****. Please attempt to *complete the form in its entirety*.\* If you have any questions, call OTM at 814.865.6277. NOTE: This is not a legal document, is not part of the formal patent application process, does not provide any legal protection for your technology, and does not constitute legal advice. The contents of this form are treated as privileged and confidential.**

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| **1. Title of Technology (brief but descriptive):** |
| Enter title here |
| **2. Innovators (list primary contact first – if more than 5, continue on pg. 4, section S1):****Instruction: Please list all innovators involved in the research, development, and/or creation activities and provide all requested information for each. If an innovator is not from PSU, please indicate below. For graduate and undergraduate student(s), please also provide a personal email. The technology contribution percent (Con %) should be decided by and between the innovators and should total 100%.**  |
|  | Full Legal Name | Email Address | Title (e.g., Professor, Grad Student, or Undergrad) | Primary College | Primary Department | Con % |
| **A** |  |   |  |   |   |  |
| **B** |   |   |   |   |   |   |
| **C** |   |   |   |   |   |   |
| **D** |   |   |   |   |   |   |
| **E** |   |   |   |   |   |   |
| *For reporting purposes, are any of the innovators female?* | Yes |[ ]  No |[ ]
| **3. Are any innovator(s) an awardee or sub-awardee on any industry or federal grant(s), contract(s), or subcontract(s) related to this technology?** **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 (i.e., material transfer agreements, consulting agreements, confidentiality agreements, terms of use/service, etc.) or sources of funding (i.e. non-federal grants (e.g. private foundation), philanthropic gifts, private investor, etc.) pertaining to this technology?** | Yes |[ ]  No |[ ]
| Agreement Type | Name of Other Party | Institution Contact |
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| *Did the technology arise from an export controlled project (i.e. one that required a technology control plan (TCP))?* | Yes |[ ]  No |[ ]
| **5. Presentations and Publications: please provide dates and brief descriptions of any publications, thesis, abstracts, appearances online [e.g. BioRxiv, ChemRxiv, arXiv, figshare], conferences, conference abstracts, poster sessions, presentations, lectures, invited talks, or other disclosures).****A public disclosure prior to filing a patent application may significantly weaken or preclude us from obtaining foreign patent rights and may also impact our ability to obtain U.S. patent rights. 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 presented, published, or otherwise disclosed? | Yes |[ ]  No |[ ]
| Please provide dates, nature, and audience of all presentations, publications, and other disclosures. |
|   |
| Please provide below your plans for presentation, publication, or other disclosure and an estimated date Click or tap to enter a date.of presentation, publication, or other disclosure. **If a public disclosure is anticipated within the next 14 days, please call our office as soon as possible so we can consider appropriate protection strategies.** |
|   |
| **6. Please provide a brief summary of the technology (no need to use all of the space provided below).** |
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| **7. Please briefly describe the problem the technology solves and how it is different from similar technologies. Describe how the technology 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/advantageous over existing products/methods (no need to use all of the space provided below).** |
|   |
| **8. Do you know of any companies that might be interested in this technology? If yes, please provide specific contacts if you have them, or simply list some companies you think might be interested.** |
| Company | Website | Contact Person | Email |
|   |   |   |   |
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|   |   |   |   |
| **9. Please provide a list of keywords which may help indexers and search engines retrieve the technology.** |
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| **10. Additional Information (convey anything not covered in preceding sections (e.g. are there related technologies filed with OTM, were any materials (e.g. plasmids, cell lines, etc.), equipment, or data used for technology development obtained from a third party, are any innovators interested in pursuing a startup company, etc.)).** |
|   |
| **11. Please provide a detailed description of the technology (e.g. include materials and components; operative and preferred ranges for process/method parameters; concentrations of chemical compounds; technical details of software (e.g. system requirements, programming language, distribution code format)) when submitting the completed form. Often a manuscript draft, grant proposal, sketch, print, photo, or similar will suffice.**  |
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**\*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 Innovators (continued from pg. 1, section 2):****Instruction: Please list all innovators involved in the research, development, and/or creation activities and provide all requested information for each. If an innovator is not from PSU, please indicate below. For graduate and undergraduate student(s), please also provide a personal email. The technology contribution percent (Con %) should be decided by and between the innovators and should total 100%.** |
|  | Full Legal Name | Email Address | Title (e.g., Professor, Grad Student, or Undergrad) | Primary College | Primary Department | Con % |
| **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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