

**Invention Disclosure Form**

**This is a confidential, proprietary, nonpublic university record
that may not be disclosed outside the university without the
approval of the Associate Provost for Research and Graduate Education**

Instructions

The purpose of this form is to provide a written, dated notice of your invention or discovery and comply with Seattle University’s Patent Policy. A disclosure may also be required in order for SU to meet its obligations arising under federal law and/or to comply with third party contractual requirements.

**Return the original signed Invention Disclosure Form and any supporting documentation to:**

Office of Research Services and Sponsored Projects

USVC 203

Seattle University

901 12th Avenue, PO Box 222000

Seattle, WA 98122

The Principal Investigator (PI) or lead inventor who is responsible for the development of this invention should complete the Invention Disclosure Form. However, all co-inventors listed in Section 1 must review and sign the Invention Disclosure Form.

* Please answer the questions with as much detail as possible. Attach additional pages and/or rows to applicable fields as necessary.
* The PI or lead inventor must sign an original Invention Disclosure Form.
* Upon receipt, ORSSP will date stamp and assign a file number to the invention disclosure for reference purposes. The disclosure will then be reviewed by University Counsel and the Associate Provost for Research and Graduate Education..
* Please provide any articles, presentations, reports, drawings, test data, assembly, or manufacturing procedures, or any other information that will aid in the understanding of this invention. Electronic copies are preferred.

Summary/Overview

**Innovators**

List all individuals who contributed to the conception of the invention. The listed individuals ultimately may or may not fall within the legal definition of “inventor.” Please place an asterisk (\*) next to the name of the person to whom correspondence from ORSSP should be sent.

If any such person is an employee of another university, company, or governmental agency, please list that person in the “non-SU innovators” table below. Please include those who hold joint appointments outsideSU in this category.

List each SU innovator:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Faculty, Staff or****Student** | **Primary Department** | **E-mail** | **Phone** |
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List each non-SU innovator:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Non-SU Affiliation** | **E-mail** | **Phone** |
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**Title of Invention**

Provide a brief title of the invention, omitting any confidential information. If there is no formal name for this invention, please provide a descriptive title that indicates what the invention is and what task(s) it accomplishes. For example, new software designed to help users without accounting training to prepare income taxes might be titled “Income Tax Software for Non-Accountants.”

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**Invention Description (Non-Confidential)**

Provide a brief summary (no more than 3-4 sentences) explaining what this invention **is** and what it **does** but not **how** it does it. Do **not** include details that reveal proprietary, competition-sensitive details, or information that would allow duplication/imitation. This summary may be published or disseminated by SU in order to attract potential licensees or to assess the potential financial return from this invention. Additional details concerning the invention should be included in Section 4 “Background Information.”

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Invention Support and Origin

If the invention was developed with the use of any research grant/contract funds, please provide the funding source information below.

Non-Federal Funding:

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| **SU Acct Number**  | **Funding Entity** |
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Federal Funding:

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| **SU Acct Number**  | **Funding Entity** | **Funding Entity Grant Number** |
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Was the invention developed with materials, information, or data received from an external source under a Material Transfer Agreement or Confidential Disclosure Agreement?

* Yes. (Describe)
* No.

Was the invention developed with materials, information, or data received from an external source in exchange for intellectual property rights?

* Yes. (Describe)
* No.

Was the invention developed during the course of outside work for pay?

* Yes. (Describe)
* No.

Could anyone else make a claim to this invention, including a previous employer or a company for which you did consulting work?

* Yes. (Describe)
* No.

Software

Complete this section only if the invention consists of or includes software.

Please indicate whether any third party code is embedded in or accessed by the disclosed software when run.

* Third party code is embedded in or accessed by the disclosed software. (Please include the name and copyright holder, if known, of any open source code, free executable code, public domain code, and any other executable or source code not written by any of the inventors listed in Section 1 of this Form. Also indicate whether the use of third-party code is under a license agreement.)
* This software is completely original code.
* Unknown.

Describe any documentation you prepared in connection with the software (e.g., user’s guide, installation guide, technical documentation, etc.).

Background Information

**The Problem Being Solved**

What potential product, process, or service could develop out of this invention? What customer problem would it help to solve (i.e., what is the need)?

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**Advantages of the Invention**

Do you know of any other inventions that are related to the subject matter of this disclosure (i.e., competitive products or services)? Why is this invention superior to competing ways of solving the same problem(s)? If possible, include information about anticipated competitive advantages of the invention and any significant barriers to the commercialization of the invention.

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Detailed Technical Description

**How It Works**

Describe how your invention functions, including details of any components involved. Attach drawings, white papers, sketches, photographs, graphs, flow charts, etc., to illustrate the invention and/or its components.

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**Level of Development**

Describe the current level of development (concept, proof of concept, prototype, full-scale model, space qualified, etc.) and plans for any additional development or testing.

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Dates of Conception and Reduction to Practice

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| --- | --- |
| Date **(MM/YYYY)** invention was conceived (i.e., mental conception of invention) |  |
| Is conception date documented in writing (i.e., a lab notebook)? **(YES / NO)**  |  |
| Date **(MM/YYYY)** of first reduction to practice (i.e., built or performed the invention) |  |

Disclosure Outside of SU

Has the invention or the essential elements of the invention been disclosed or shared with individuals outside of SU (e.g., in an abstract, paper, talk, conference, or through a formal or informal presentation)?

* Yes. (Describe the nature of disclosure and its approximate date)

* No.

If you answered “Yes” to the previous question, was the disclosure made under a confidentiality, non-disclosure or similar agreement limiting the recipient’s rights to disclose?

* Yes.
* No.

Do you intend to publicly disclose the essential elements of the invention in the next six months?

* Yes. (Describe the nature of disclosure and anticipated date)
* No.

Commercialization Potential

Speculate on what you is believe is the commercial potential of this invention.

* Don’t know.
* Research or government agency interest only.
* Describe commercial potential in the space provided below, including potential marks and interested companies:

**Industry Contacts**

Please include any and all industry contacts made or to be made related to this invention.

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| --- | --- | --- |
| **Name** | **Company** | **Address/Phone/E-mail** |
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For further information or to discuss Invention Disclosure please contact the Director of the Office of Research Services and Sponsored Projects or University Counsel.

Seattle University Patent and Copyright Ownership Policies available at <http://www.seattleu.edu/orssp/policies/>