



TECHNOLOGY, INNOVATION LAW,
AND ETHICS (TILE) PROGRAM

**Washington State TILE/Patent Pro Bono Hub Inventor's
Application for Patent Prosecution Assistance**

Salutation: Mr. Ms. Mrs. Dr. other (specify_____)

First Name _____

Middle Name _____

Last Name _____

Phone _____

Email _____

Address _____

Are you a Resident of Washington State? Yes No

If your answer is no, then due to failure to meet the residency constraints of the Washington State/TILE Patent Pro Bono Hub, it is unable to place your application. You may want to review the resources on the USPTO site for filing you appeal pro se (on your own): <https://www.uspto.gov/patents/basics/using-legal-services/pro-se-assistance-program>

Demographic Data

Gender: M F Other Prefer Not to Say

Ethnicity: Hispanic Other Prefer Not To Say

Race:
 Black Asian Pacific Islander Mixed (2 or more) Prefer Not to Say
 American Indian or Alaskan Native Veteran White

Status: Yes No

Financial Information

Do you have a household income of less than 300% (3x) federal poverty guidelines: Yes No
<https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines?>*

If your answer is no, then due to failure to meet the financial constraints of the Washington State/TILE Patent Pro Bono Hub, it is unable to place your application. You may want to review the resources on the USPTO site for filing you appeal pro se (on your own): <https://www.uspto.gov/patents-getting-started/using-legal-services/pro-se-assistance-program>

* You will need to provide proof of income such as 1040 Forms submitted and accepted by the IRS (with social security number obscured) and/or Social Security payments, disability benefits, Medicaid information, etc., along with this application.

Knowledge

Have you completed the 1 hour training course offered by the [USPTO at USPTO Basic Patent Training Certification Course \(English\)](#) or [Basic Patent Training Certification Course \(versión en español\)](#)?

Yes No

If your answer is no, then due to failure to meet the knowledge requirements of the Washington State/TILE Patent Pro Bono Hub, it is unable to place your application. Please take the training course prior to applying to the Washington State/TILE Patent Pro Bono Hub. You will need to include your Certificate of Completion of the USPTO's online Basic Patent Training with this application.

Are you currently represented for the invention for which patent protection is sought? **Yes No**

If your answer is yes, then due to being represented in this matter the Washington State/TILE Patent Pro Bono Hub is unable to place your application. You may want to review the you're your patent practitioner or review resources on the USPTO site for filing you application *pro se* (on your own): <https://www.uspto.gov/patents-getting-started/using-legal-services/pro-se-assistance-program>.

Invention/Appeal Information

Title of Invention: _____

Basic Subject Area (Check all that apply)

- Bio/lifesciences
- Ornamental Design
- Mechanical
- Chemical
- Electrical/Computer

Do you have a provisional application on file with the USPTO? Yes No

If yes, then:

Provide the application no: Application No: _____

Provide the filing date: _____

If the current date is more than 6 months from the filing date of provisional, then due to timing constraints for filing the non-provisional application, the Washington State/TILE Patent Pro Bono Hub is unable to screen and place your application before the expiration of your provisional application. You may want to review the resources on the USPTO site for filing you appeal *pro se* (on your own): <https://www.uspto.gov/patents-getting-started/using-legal-services/pro-se-assistance-program>

Brief Summary of Invention (please do not share any confidential details and data)

Briefly describe the basis for your invention (please limit explanation to what you believe to be your invention and the improvement over the existing prior art). Limit the description to 250 words or less.

(You can append a separate page to this application.)

Disclosures

By signing below, and by submitting this application, I am making the following representations:

1. The information provided by me in this application is, to the best of my knowledge, complete and accurate.
2. I understand that submitting false or misleading information may result in delay or denial of services.
3. I understand that misrepresenting the financial information used to establish my qualification for micro-entity status to the United States Patent and Trademark Office may constitute fraud, and could result in the invalidation of the patent or application.
4. I will notify the Washington State/TILE Patent Pro Bono Hub if any of the information in this application materially changes prior to placement with an attorney, especially if any inventor's income should suddenly increase.
5. I have not shared any confidential details of my invention, other than the provisional patent application number, with the Washington State/TILE Patent Pro Bono Hub.
6. I understand that continuation in the program is at the discretion of the program administrator, and that filling out this application does not entitle me to any services.
7. I agree and understand that this application does not create an attorney-client relationship between any named inventor or myself and any individual attorney, the Seattle University School of Law, and/or the Washington State/TILE Patent Pro Bono Hub.
8. I understand that the Washington State/TILE Patent Pro Bono Hub is limited to screening the application. If approved by the Washington State/TILE Patent Pro Bono Hub, they will provide my information to participating volunteer attorneys in Washington state for matching.
9. I understand that any participating volunteer attorney assigned to the application is responsible with placing the matter with either a patent attorney or patent agent, and that this person's representation may be limited to the filing of the application.
10. I understand that successful screening of the application and referral over to the participating volunteer attorney does not guarantee that I will be matched with a patent attorney or patent agent.
11. I understand that the Washington State/TILE Patent Pro Bono Hub scope of services are limited to the screening of applicants, if I have another legal issue prior to placement with a patent attorney/agent, the Washington State/TILE Patent Pro Bono Hub will not handle the placement of these issues. I further understand that while my assigned attorney *may* take on these additional matters, they may charge additional fees for these services.
12. I understand that the applicant remains responsible for the payment of all necessary governmental fees and ancillary fees when necessary.

_____ (signature of applicant) _____ (date)

After submitting this application, the program administrator will review the details and will attempt to contact you within a reasonable period of time. It may take several weeks to review the application. Keep in mind that the office is usually closed on and around major holidays, and delays are likely during these periods of the year. Please review your application carefully before submitting and keep a copy for your records.