

RICE UNIVERSITY MATERIAL TRANSFER AGREEMENT OUTGOING MATERIAL

MATERIAL REQUESTED: \_\_\_\_\_

Should these materials be considered as confidential materials of Rice? Yes No

Are these materials biological or non-biological?

Department: \_\_\_\_\_
Faculty Provider: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_
Alternate Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

CONTACT INFORMATION

Recipient Organization: \_\_\_\_\_ Recipient Scientist: \_\_\_\_\_

Administrative Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address:

1. Research [Please provide or attach a brief description of the proposed research using the Material]:

[Empty box for research description]

2. Will you collaborate on the Research using the Materials with the Recipient Scientist? Yes [ ] No [ ] [If yes, please explain - will data Yes [ ] No [ ] or materials Yes [ ] No [ ] be returned to you?]:

[Empty box for collaboration explanation]

3. Is the Material part of an invention that you have disclosed or anticipate disclosing to the Office of Technology Transfer? Yes [ ] No [ ] [If yes, please explain]:

[Empty box for invention disclosure explanation]

4. Is the use, disclosure or transfer of the Material restricted by any third-party agreements or rights? Yes [ ] No [ ] [If yes, please explain]:

[Empty box for restrictions explanation]

5. Should there be any specific restrictions on the Recipient's use of the Material? Yes [ ] No [ ] [If yes, please explain]:

[Empty box for restrictions explanation]

6. If the Material or related methodology has been described in any publication provide the citation:

[Empty box for citation]

7. What is the cost for preparation and shipment of the material? (Only required if the Recipient Organization is a commercial entity) Should recipient be charged for preparation and shipment? Yes No

[Empty box for cost information]

8. Do you, any other Investigator(s) working with the Material, or any family members or persons living with you have any financial interest in the Recipient of the Materials or in any other entity which might be affected by the results of the proposed Research? Yes [ ] No [ ] [If yes, please describe the financial interest]:

[Empty box for financial interest description]

9. If the Material is/was derived from human subjects (such as tissues, fluids or human data), please provide the Rice IRB protocol number: \_\_\_\_\_
10. If the Material was developed, derived from or part of research involving animals, please provide the Rice IACUC protocol number \_\_\_\_\_
11. Will the materials be used by the Recipient in animals? Yes  No
12. Please provide the protocol number if applicable for: rDNA: \_\_\_\_\_ or IBC: \_\_\_\_\_
13. Are the Materials subject to Export Control restrictions? Yes  No
14. Were the Materials made or will they be made using grant or contract funds? Yes  No  If yes, please list the grant or contract sponsor: \_\_\_\_\_ and R Fund Number(s): \_\_\_\_\_
15. Is Recipient working on a funded grant or contract with you for this research? Yes  No  If yes, please list the grant or contract sponsor: \_\_\_\_\_ and R Fund Number(s): \_\_\_\_\_

**CERTIFICATION**

I agree that if the Research involves (a) human subjects, (b) animals, or (c) recombinant DNA techniques, (d) radioactive materials, (e) hazardous (d) chemical waste, (f) bio-hazardous material or (g) infectious agents, I will obtain the required University approvals prior to shipping the Material. I certify, to the best of my knowledge, that the Research involving these Materials will be conducted in accordance with all applicable requirements including any sponsor policies, regulatory requirements and/or laws.

FACULTY SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_