

MATERIAL TRANSFER REQUEST FORM – Outgoing Questionnaire

In order to expedite and facilitate reaching an agreement, and at the same time maximize our ability to protect your technology and act in your best interest, in conjunction with that of the University, it is necessary to receive the following information. Please complete as fully as possible.

COM RO Use Only
Huron ID: _____

RECIPIENT INFORMATION AND DISCLOSURES. Please complete the below questions for who is the point of contact for this MTA.

Recipient Organization: _____

Recipient Scientist Name: _____ **Email:** _____

Disclosures:

	Yes	No
Have you received, or will you receive, a financial gift from the provider?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a financial relationship with the provider? If YES, please describe in the additional comments section.	<input type="checkbox"/>	<input type="checkbox"/>

ABOUT THE MATERIAL. Please complete the below questions as they relate to the outgoing material.

1. Name and description of Material: _____

2. What is the function of the material: _____

3. Quantity to be transferred: _____

4. Approximate value of the materials: _____

5. What is the origin of the material? (check all that apply)

Human (IRB#: _____)
 Animal (IACUC # _____)
 Plant
 Plasmid
 Other: _____

6. What is the material classification? (check all that apply)

<input type="checkbox"/> Compounds/Chemicals	<input type="checkbox"/> Biological Toxins	<input type="checkbox"/> Non-hazardous agents
<input type="checkbox"/> Recombinant or synthetic DNA/RNA	<input type="checkbox"/> Infectious agents	<input type="checkbox"/> Hazardous agents
<input type="checkbox"/> Radiological agents	<input type="checkbox"/> Select Agents	<input type="checkbox"/> Live Animals
<input type="checkbox"/> Other: _____		

7. Indicate the type of material. (check all that apply)

<input type="checkbox"/> Cells	<input type="checkbox"/> Tissue	<input type="checkbox"/> Organ(s)
<input type="checkbox"/> Blood or blood components	<input type="checkbox"/> Frozen	<input type="checkbox"/> Fixed
<input type="checkbox"/> Other bodily fluids <input type="checkbox"/> Other: _____		

8. How was the material obtained? (check all that apply)

Purchased from a commercial source
 Created/developed at UCF
 Received from another source

8a. If from another or commercial source, was the material received with or without an agreement?

Please name the source of the material: _____

8b. If the material was created/developed at UCF, does it incorporate research materials received from others?

Yes No ; If YES, please describe UCF's original material, its relationship to the third party material, and how the materials have been combined:

8c. Was the development of this material funded by a sponsored agreement or other extramural funding at UCF?

Yes No ; If YES, please indicate the sponsor: _____

MATERIAL USE DETAILS. Please complete the below questions as they relate to the receiving scientist use of the material being providing.

Provide a concise scientific description of the receiving scientist's use of the material being provided.

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ADDITIONAL QUESTIONS	Yes	No
1. Do you anticipate any inventions will be developed from the recipient’s use of the material?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you anticipate the recipient will develop any modifications with the material?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the recipient have the material in their possession?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the material be used by the recipient in conjunction with any other material(s) received from another entity?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the recipient export the material?	<input type="checkbox"/>	<input type="checkbox"/>
6. Did the recipient receive a MTA or any other agreement from UCF?	<input type="checkbox"/>	<input type="checkbox"/>
7. Was the material “specifically designed” or modified for a military applicable?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the recipient have any foreign national be working with the material?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will any third party or vendor use or access UCF data under this agreement?	<input type="checkbox"/>	<input type="checkbox"/>
10. To your knowledge, is the material export controlled under US Export Control Regulations?	<input type="checkbox"/>	<input type="checkbox"/>
11. To the best of your knowledge, is the material, or any portion thereof, subject to intellectual property protection by third parties (including your prior employers, if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>
12. Are you providing any proprietary technical information or data?	<input type="checkbox"/>	<input type="checkbox"/>
13. Can the material be purchased commercially (is the material publicly available without restriction)?	<input type="checkbox"/>	<input type="checkbox"/>
14. Are there any transfer costs that should be reimbursed to your lab?	<input type="checkbox"/>	<input type="checkbox"/>
15. Is the material a derivative or modification of material received from another party?	<input type="checkbox"/>	<input type="checkbox"/>
16. Was the material used in conjunction with any other materials received from another entity?	<input type="checkbox"/>	<input type="checkbox"/>
17. Have you published on the material or a related methodology? <i>(Please provide citation below if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered “Yes” to any of the above questions, please provide a detailed explanation:

18. How long will the material be used for? _____ to _____ (or note # of Years: _____)

ADDITIONAL COMMENTS. *Please provide any additional comments that may be helpful in the review of this MTA.*

Please be aware that there may be terms and conditions in the Material Transfer Agreement which may (i) preclude your use of the Materials in research sponsored by third parties, or (ii) prevent you from obtaining materials in the future from third parties whose policies do not allow distribution of Materials to investigators whose rights to commercialize technology may be limited by pre-existing obligations.

PRINCIPAL INVESTIGATOR CERTIFICATION			
By signing this form, I certify that the foregoing is true and correct to the best of my knowledge, and I agree to comply with current university policies and federal regulations.			
PI Name (Typed):		PI Signature:	

DEFINITIONS

MATERIAL: Original Material, Progeny, and Unmodified Derivatives. The MATERIAL shall not include (i) Modifications or (ii) other substances created by the RECIPIENT through the use of the MATERIAL which are not Modifications, Progeny or Unmodified Derivatives.

PROGENY: Unmodified descendant from the MATERIAL, such as virus from virus, cell from cell, or organism from organism.

UNMODIFIED DERIVATIVES: Substances created by the RECIPIENT which constitute an unmodified functional sub-unit or product expressed by the Original Material. Some examples include: subclones of unmodified cell lines, purified or fractionated sub-sets of the Original Material, proteins expressed by DNA/RNA supplied by Provider, or monoclonal antibodies secreted by a hybridoma cell line.

MODIFICATIONS: Substances created by RECIPIENT which contain/incorporate MATERIAL (Original Material, Progeny, or Unmodified Derivatives).

COMMERCIAL PURPOSES: The sale, lease, license, or other transfer of the MATERIAL or MODIFICATIONS to a for-profit organization. COMMERCIAL PURPOSES shall also include uses of the MATERIAL or MODIFICATIONS by any organization, including RECIPIENT, to perform contract research, to screen compound libraries, to produce or manufacture products for general sale, or to conduct research activities that result in any sale, lease, license, or transfer of the MATERIAL or MODIFICATIONS to a for-profit organization.

NONPROFIT ORGANIZATIONS: A university or other institution of higher education or an organization of the type described in section 501(c)(3) of the Internal Revenue Code of 1954 (26 U.S.C. 501(c)) and exempt from taxation under section 501(a) of the Internal Revenue Code (26 U.S.C. 501(a)) or any nonprofit scientific or educational organization qualified under a state nonprofit organization statute. As used herein, the term also includes government agencies.

FOREIGN NATIONAL: A Foreign National is any person who is NOT a U.S. citizen, Permanent resident alien (Green Card Holders), Asylee, Refugee, Temporary resident under amnesty provisions. The following are considered foreign nationals or foreign persons: Foreign corporation, business association, partnership entity or group not incorporated in the U.S. or person in the US in non-immigrant status (i.e. international students, visiting scholars or any person on visa types: H-1B, H-1B1, H-3, L-1, J-1, F-1, L-1, O-1, etc.)