

**Material Transfer (MTA), Data Transfer (DTA) or Confidentiality (CDA) Agreement Request Form**

### UC Davis InnovationAccess Phone: 530-754-8649

### 1850 Research Park Drive, Davis, CA 95618-6134 Fax: 530-754-7620 attn: MTA

### **Email to:** [**MTA@ucdavis.edu**](mailto:MTA@ucdavis.edu?subject=Request%20for%20material,%20data%20or%20confidentiality%20agreement) Check our website itc.ucdavis.edu/MTA

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| **UC Davis principal investigator (PI)**  College/School:  Department:  Name & Title:  Telephone:  Email: | **Outside organization**  Organization name:  non-profit, university or government  for profit  Name & title of scientist:  Telephone:  Email: |
| **UC Davis primary contact (if other than PI)**  Name and Title:  Telephone:  Email: | **Outside organization’s legal or administrative contact**  Name:  Telephone:  Email: |

1. UC Davis will  receive material/data  provide material/data  both

UC Davis will  receive confidential information  provide confidential information  both

1. Name/description of the material, data or confidential information:
2. Date material/data is needed:   /  /
3. Dates of the research:   /  /      to   /  /
4. Proposed use (2-3 sentences):

Note: If the outside organization provided an agreement, please include with this request form.

**If you are RECEIVING material/data/confidential information:**

1. Origin of the material  human  plant  animal  other

NOTE: If specimens/data/records are from human subjects, *and* contain personal identifiable information *and* will be used for research purposes, contact the [UCD IRB Administration](http://research.ucdavis.edu/policiescompliance/irb-admin/) for further information about human subject research.

1. Will derivatives or modifications be made?  yes  no  do not know
2. If the material can be purchased or obtained from another source, please specify:
3. If you will use this material with other material from another provider, specify the other material      , provider name      and MTA file number       (if known, enter “yes” if not)
4. If the material/data/confidential information will be used in support of UC research, do you, your spouse, domestic partner or dependent children have a financial interest in the provider organization (e.g. equity/ownership interest, management position, consulting arrangement, etc.)?  yes  no

If yes, complete the *California Form*  (available at <http://research.ucdavis.edu/resources/forms/#Forms-FinancialConflictsofInterest>). If you answered “yes” to any questions in *Form 700-U Part 3*, send a signed original of *the California Form 700-U* and the *PI Supplemental Form* with this request. We will forward the forms to the Research Compliance Office for approval.

1. Indicate the current or anticipated funding source(s) for the research.

Federal grant (grantor name):       (award number):       (amount): $

Sponsored research agreement (sponsor name):       (award number):        (amount): $

Gift funds (donor name):       (amount): $

Department funds (amount): $

Other grant or source of funds (please specify):       (award number):       (amount): $

**If you are PROVIDING material/data/confidential information**:

1. If it uses or incorporates material(s)/data received from another entity, specify the provider      , MTA file number for that transfer       (type YES if you don’t know it) and describe the material/data
2. If there is a UC Record of Invention (ROI), specify the UC Case Number (type YES if you don’t know it):

**Please provide any additional information here:**

**Email form and any attachments to mta@UCDAVIS.EDU**