

# Material Transfer Agreement (MTA) Information Sheet



## OFFICE OF SPONSORED PROGRAMS COLORADO STATE UNIVERSITY

This signed information sheet must be provided for any Material Transfer (incoming or outgoing) at CSU. Please pass along the MTA document itself, if one has been provided. *This Information Sheet can only be signed by a CSU non-temporary, salaried state classified employee, administrative professional, or faculty member.*

CSU **PROVIDER** (Sender): Complete Page 1; **Sign** Page 2 of the Info Sheet

Choose one: CSU **RECIPIENT** (Receiver): Complete both Pages 1 & 2; sign Page 2

CSU is both Provider and Recipient: Complete both Pages 1 & 2; sign Page 2

- Send this Info Sheet and the MTA document (if one has been provided) to [OSP\\_MTA\\_NDA@mail.colostate.edu](mailto:OSP_MTA_NDA@mail.colostate.edu);
- Review the MTA and familiarize yourself with its terms as you are required to abide by them; flag any questionable terms for discussion with Sponsored Programs.

- Questions can be sent to the OSP MTA NDA mailbox: [OSP\\_MTA\\_NDA@mail.colostate.edu](mailto:OSP_MTA_NDA@mail.colostate.edu)

1. CSU person requesting *or* providing the material:

Name:

Department:

Email:

Phone and Fax Numbers:

2. Organization providing the materials **OR** the organization receiving the materials, with contact information:

Organization Name:

Contact Name:

Department:

Mailing address:

Email:

Phone and Fax Numbers:

3. Please provide a brief description in lay terms, of the materials being transferred (*e.g. a proprietary drug, a plasmid, a specific type of inhibitor, seed type, etc.*)

4. Is this material included on the current select agent and toxin list?    Yes    No

5. What will you be doing with the materials? (*N/A if you are the provider of the materials.*)

6. If the materials are being used in conjunction with a current grant or contract, or if they involve materials or processes developed with prior sponsorship, please provide the name of the sponsor and project number (*i.e., 5-3 number*)

7. Are there any conflicts between the terms of this MTA and your current or past funding or other involved MTAs, confidentiality agreements, or intellectual property agreements?    Yes    No

**If yes, please provide an explanation.** (*For example, a private company might require confidentiality but the materials are used on a federal project that cannot promise restricted access to results, or the materials are used with other materials whose MTA terms conflict with this one.*)

**ANSWER THE ITEMS BELOW IF YOU ARE THE RECIPIENT OF THE MATERIALS**

A. Research that involves any of the following requires approval by the Institutional Biosafety Committee (IBC). Please answer each item below. (IBC application forms, and information on exempt, and non-exempt rDNA can be found at: <https://www.research.colostate.edu/ricro/ibc/forms/>)

1. Does the material itself or the planned use of the material involve infectious agents?    Yes    No
  - a. Have you obtained IBC approval for the agent(s)?    Yes    No
  - b. Is an import or export license required?    Yes    No

➤ If you are unsure, please contact CSU's Secure & Global Research Office:  
<https://www.research.colostate.edu/sgr/about/contact>

2. Does the material itself, or the planned use of the material, involve human blood, body fluids or tissues?  
Yes    No

3. Does the material itself, or the planned use of the material, involve recombinant DNA (excluding exempt experiments)?    Yes    No

4. If you have answered "yes" to any of the above questions (1-3), you are required to obtain IBC Project Approval prior to initiation of any work with the material.

- a. If you have IBC Project Approval, please indicate the approval number:
- b. If you do not have IBC Project Approval, do you certify that you will obtain the necessary approval prior to initiating any work with the material?

B. If the use of the material will involve animals (research, testing, teaching, breeding, and the like) IACUC approval will be required prior to initiation of any work with animals.

1. If you have IACUC approval, please indicate the approval number:
2. If you do not have IACUC approval, do you certify that you will obtain the necessary approvals prior to initiating any work with animals?

C. If the material will be used for human research, or was collected from humans (cell lines, fluids, tissue samples, IRB approval will be required prior to initiation of any work.

1. If you have IRB approval, please indicate the approval number:
2. If you do not currently have IRB approval, do you certify that you will obtain any necessary approvals prior to initiating any work with human subjects or tissues?

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name:  
(required)