

**CORNELL UNIVERSITY –OFFICE OF SPONSORED PROGRAMS
MATERIAL TRANSFER AGREEMENT STATEMENT**

INVESTIGATOR requesting Material(s):

Academic Title:

Administrative Unit:

Telephone Number:

Email address:

Location where the Material will be used:

PROVIDER supplying Material(s):

Street Address:

City:

State:

Zip code:

Telephone Number:

Email address:

AUTHORIZED REPRESENTATIVE of Provider:

Name:

Telephone Number:

Email address:

Is this Provider a sole source provider for the Material(s)? Yes No

Material(s) will be utilized during the period

What source(s) of funding will be used to support the research?

Sponsor:

Project title:

Grant Number:

OSP Number:

Identify the Material(s) being transferred and provide a brief lay description of the proposed use:

Please check all of the following uses that that apply to the Material(s):

The Material(s) will be provided for the purpose of product testing and evaluation (i.e., testing an expression system) for the providing organization.

The Material(s) will be the actual subject of the research.

The Material(s) are a tool, kit, or instrument that will be used in the conduct of research.

Progeny, unmodified derivatives, or descendant copies will be made from the Material(s).

The Material(s) will be modified or will be used to produce modified derivatives.

There is a possibility that the work involving the Material(s) will be included in a graduate student's thesis or dissertation.

The Material(s) will be used in conjunction with other material(s) received from a third party. If checked, identify other material(s) and provider(s):

OSP #

PROVIDER

MATERIAL

