

Material Transfer Process

Option #2

I wish to RECEIVE materials

Form Instructions

Overview:

The "I wish to RECEIVE materials" form facilitates the processing of the Material Transfer Agreement (MTA) by providing necessary information to ensure that the receiving of materials for research is conducted in accordance with applicable UCSD policies.

UCSD Principal Investigator Information:

Last Name: Provide the last name of the Principal Investigator who will conduct the research using the requested materials. **Please Note:** Only the academic in charge of the laboratory is authorized to, and may request transfers of UCSD research materials. If this is not the same individual as the Principal Investigator listed on the form, the academic who is in charge of the laboratory must sign this form as well.

First Name: Provide the first name of the Principal Investigator who will conduct the research using the requested materials.

Phone#: Provide the telephone number, including area code of the Principal Investigator who will conduct the research using the requested materials.

Email: Provide the email address of the Principal Investigator who will conduct the research using the requested materials.

Fax #: Provide the Fax number, including the area code of the Principal Investigator who will conduct the research using the requested materials.

Mail Code: Provide the Mail Code of the Principal Investigator who will conduct the research using the requested materials.

Building: Provide the name of the building where the research will be conducted using the materials.

Lab Room #: Provide the room number of the laboratory where the research will be conducted using the materials.

Department Org. #: Provide the department Organization Number. If you do not know the department Organization Number, contact your department business office.

UCSD Department Contact Information:

Last Name: Provide the last name of an individual in the PI's department who is able to provide information regarding this request in the absence of the academic in charge of the laboratory.

First Name: Provide the first name of the individual in the PI's department who is able to provide information regarding this request in the absence of the academic in charge of the laboratory.

Phone#: Provide the telephone number, including area code of the individual in the PI's department who is able to provide information regarding this request in the absence of the academic in charge of the laboratory.

Email: Provide the email address of the individual in the PI's department who is able to provide information regarding this request in the absence of the academic in charge of the laboratory.

Provider Information:

Organization Name: Provide the name of the company/institution/government entity that will provide the materials.

Contact Name: Provide the first and last name of the company/institution/government entity's authorized representative responsible for processing this transfer request on behalf of the company/institution/government agency.

Phone #: Provide the telephone number of the company/institution/government agency's authorized representative responsible for processing this transfer request on behalf of the company/institution/government entity.

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Email: Provide the email address of the company/institution/government entity's authorized representative responsible for processing this transfer request on behalf of the company/institution/government entity.

Fax #: Provide the fax number of the company/institution/government entity's authorized representative responsible for processing this transfer request on behalf of the company/institution/government entity.

Material Transfer Process Questions:

- 1. Identify material to be received.** Specify the materials to be received in the space provided, and then check the appropriate box. If "Other" is checked, describe using the additional space provided.
- 2. Identify origin of material.** Indicate whether the origin of the material is animal, human, or other (e.g. plant, chemical, plasmid, etc.), using the space provided.
- 3. Is the material a human embryonic stem cell? If Yes,** specify whether or not the requested hESC are identified in the President's August 2001 Registry.
- 4. Provide a concise scientific description of the proposed intended use of the material.** Provide a brief, but reasonably detailed description of the research to be conducted with the transferred materials.
- 5. List the Human Subjects Protocol Number if receiving human blood, tissue, or embryonic stem cells:** If the material to be received is human blood, tissue or human embryonic stem cells, a UCSD Human Subjects Protocol must be approved prior to finalizing the transfer of such materials. Provide the UCSD Human Subjects Protocol Number.
- 6. Identify the funding source for the proposed use of the material.** List the Agency Name and the Fund Number of the source of funding the UCSD Principal Investigator will use to conduct research with the requested materials. The Fund Number is a 5 digit number ending in an alpha. For example; if you are using NIH funding to conduct work using the materials: Agency Name is: NIH: Fund Number: 26754A.
- 7. Will you be making derivatives or modifications of the material received? For example; creating novel materials incorporating the agency's material, or using the material to create other substances?** Indicate whether your research with the transferred biological or chemical materials will include making derivatives, e.g., novel materials that contain or incorporate the transferred materials, or derivatives, respectively.
- 8. Will the provider's material be used with material owned by an Industrial or Non Profit agency?** Indicate whether your research with the transferred material will include making modifications. For example; novel materials that contain or incorporate the transferred materials or derivatives that incorporate materials from a third party; Industrial or Non Profit agency.
- 9. Can the material be purchased from the provider or from another source?** Indicate whether the materials may be purchased, or otherwise obtained?
- 10. Will you be receiving a financial gift from the provider?** Indicate whether you will be receiving a financial gift from the provider of the materials?
- 11. Have you received a financial gift from the provider?** Indicate whether you have received a financial gift from the provider of the materials?
- 12. Do you have a financial relationship with the provider? For example; private consulting, stock ownership, etc.** Indicate whether you are a private consultant, own stock, serve in a management position, or receive income from the provider of the materials.

Principal Investigator:

Principal Investigator Signature: The Principal Investigator who is receiving the material signs. **Please Note:** Only the academic in charge of the laboratory is authorized to, and may request transfers of research materials. If this is not the same individual as the Principal Investigator listed on the form, the academic who is in charge of the laboratory must sign here as well.