

### Incoming Material Transfer Agreement (IMTA) Request Form

**PIs must email completed and fully signed Material Transfer Agreement to [ELP-Research-Contracts@ttuhsc.edu](mailto:ELP-Research-Contracts@ttuhsc.edu) along with all the relevant research committee approvals prior to submitting this form (Institutional Biosafety Committee (IBC), Institutional Animal and Care Use Committee (IACUC), Institutional Review Board (IRB), and LARC Animal Import Request Form.**

**Recipient Information**

TTUHSC EP Principal Investigator

Department School

Phone Email

Alternate Department Contact Phone

Email

**Firm/Institution Providing Material**

Primary Address

Provider Investigator

Phone Email

Provider Firm/Institution Contact for Question/Negotiations

Phone Email

Research Plan (Briefly describe recipients intended use of material)

Nature/Involvement of the material to be transferred (Please check all that pertain and attach in email):

- |   |        |                          |
|---|--------|--------------------------|
| Biohazardous, infectious or Recombinant DNA | IBC#   | IBC last approved date   |
| To be used in Humans                        | IRB#   | IRB last approved date   |
| To be used in Vertebrate animals            | IACUC# | IACUC last approved date |
| Radioactive sub-license under name          |        |                          |
| Subject to Export Controls                  |        |                          |
| Oncomouse Technology                        |        |                          |
| Cre-Lox Technology                          |        |                          |
| Select Agent (Patriot Act)                  |        |                          |

| No. | Material Information   |     |    |
|-----|--|-----|----|
| 1.  | Is PHI De-Identified?  | Yes | No |
| 2.  | Is the providing firm/institution the sole source of the material?   | Yes | No |
| 3.  | Will the material be used in conjunction with other materials that have an existing invention disclosure, patent, or patent application? | Yes | No |
| 4.  | Estimate the length of time you will be using the material (months, years, etc.)   |     |    |
| 5.  | Does the research involve a third party collaborator (at another institution)?<br>Party's Name:<br>Physical Address:<br>Email Address:   | Yes | No |
| 6.  | Will the research result in a modification or alteration of the material?  | Yes | No |

|     |   |     |    |
|-----|---|-----|----|
| 7.  | Do you have an interest in developing intellectual property (inventions, copyright, software) while using the material?   | Yes | No |
| 8.  | Is it now or will the research that involves this material be funded?<br>If yes, list funding agency (ies)  | Yes | No |
| 9.  | Do you plan to publish the results from research using this material?   | Yes | No |
| 10. | Often the provider asks that at least one month be allowed for prior review of a proposed publication before submission for publication. Is there a time limit that you would not accept?<br>If yes, how long?  | Yes | No |
| 11. | Will you accept very restrictive language in the MTA that could prevent you from ever publishing the studies that use this material?  | Yes | No |
| 12. | Some MTAs ask for intellectual property rights on the studies that you are proposing, as well as all future studies that are a result of the immediate studies for which you are requesting the material. Are you willing to accept such restrictive language?<br>If yes, please elaborate: | Yes | No |
| 13. | Is this material a select agent or toxin as defined by the federal government?<br>(See <a href="https://www.selectagents.gov/SelectAgentsandToxinsList.html">https://www.selectagents.gov/SelectAgentsandToxinsList.html</a> )  | Yes | No |

(Please ensure you contact Research Compliance for research export control instructions)  
email to: [elp-researchcompliance@ttuhsc.edu](mailto:elp-researchcompliance@ttuhsc.edu)

### PRINCIPAL INVESTIGATOR REPRESENTATIONS AND CERTIFICATIONS

**My signature below certifies that:**

- 1) The information submitted on this form is true, complete, and accurate to the best of my knowledge.
- 2) Any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.
- 3) I agree to accept responsibility for the scientific conduct of the subject material.
- 4) The personnel involved in this project are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from any federal department or agency.
- 5) I agree to be bound by the terms and conditions of the material transfer agreement.
- 6) I agree to annually certify and report any changes to significant financial interests of my own, investigators, senior/key personnel, and family members within 30 days of discovering or acquiring a new significant financial interest, as mandated by HSCEP OP 73.09.
- 7) I have reviewed the attached contract document(s) and recommend executing the attached document(s) as written. In addition, I can confirm that we do have available resources to fulfill all of the obligations contained in this agreement or contract, and it is within the mission of this department or area of responsibility. I feel this agreement or contract is a proper activity to enter into, that it will be beneficial to TTUHSC, and it complies with Board of Regents and TTUHSC policies. [The policies cited here are HSC OP 54.01 - 54.02 - 54.04 and Board of Regent's Rules 07.12].

**Financial Conflict of Interest Disclosure**

Do any of the participating faculty, staff, or students (or their spouses or dependents/children) have any financial interests, such as royalties, equity, or any other payments (e.g., consulting, salary, etc.) in the



sponsor or other entities having a financial interest in the intellectual property, products, or services that are the subject of the proposed project?            Yes            No

If yes, attach Financial Disclosure Form(s).

To the best of my knowledge, the information I have provided herein is true and accurate:

Principal Investigator/Scientist

Department Chair Approval Signature,  
or President's Signature

**NOTE: If the PI is the Department Chair, please obtain President's signature of approval. Please email the completed form, with all required signatures, to [ELP-Research-Contracts@ttuhsc.edu](mailto:ELP-Research-Contracts@ttuhsc.edu)**

*DISCLAIMER: If information is incomplete or supporting documentation was not attached, (etc. IRB, IACUC or IBC letters), form will be returned to department or Principal Investigator.*

