MATERIAL TRANSFER AGREEMENT_OUTBOUND

This form is required when a GVSU investigator is sending a material to another organization. Complete this form and email it to tco@gvsu.edu.

GVSU PRINCIPAL INVESTIGAT	OR INFORMATION					
PI First Name	PI Last Name		PI Email Address			
PI Work Phone Number	PI Cell Phone Number					
DESCRIBE THE MATERIAL BEIN	IG SENT					
Is the material of human origin or	obtained from a human specimen	n? Yes	No			
If yes, does it include patient iden	tifiers? Yes No					
Receiving institution or compar	y name:					
Recipient First Name	Recipient Last Name	Re	cipeint Email Addre	SS		
ABOUT THE MATERIAL Is there a collaborator outside of approve the the MTA? Yes If yes, please provide their name, Was the Material created using of the second of the	ther material you received under a ial and its source. sult of research sponsored by the	o contributed to the	e generation of the I	oany? Y e		No
Have you already published inform	nation related to the Material?	Yes No				
Is this Material related to any Inve	•			lization Office?	Yes	No
Will you charge the Recipient a fe	e for the shipment of the Material?	? Yes N	0			
Do you want the Recipient to prov	ide you with a copy of a publication	on describing their	use of the Material?	? Yes	No	
Do you want the Recipient to notif	y you of any inventions resulting f	rom the use of the	Material? Yes	s No		
Will you be providing any confider	itial (non-published) information to	the Recipient?	Yes No	•		

Note: Send this completed form and any correspondence received from the Recipient to tco@gvsu.edu. An MTA will be generated and sent to the Recipient for signatures and then forwarded to you for signatures. A copy of the agreement will be provided to you for your files once the MTA is fully executed by authorized representatives.