**REQUEST FOR AN MTA For incoming material**

A Material Transfer Agreement (MTA) is a contract that governs the transfer of tangible research materials between two organizations, defining the rights of the provider and the recipient with respect to the materials and any derivatives. The information you provide will help KAUST determine the simplest agreement to use that will preserve intellectual property rights in the materials. KAUST will not be able to execute an MTA on your behalf without your signature on this form, and the required approval by the applicable committee below, if required.

**IMPORTANT NOTICE: It is your responsibility as PI to obtain IBEC/IACUC/IRSC approval where needed to work with the material. MTAs will not be approved without research project review and approval from the appropriate committee(s).**

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| **A.** Registration with the Institutional Biosafety and Bioethics Committee (IBEC@kaust.edu.sa) is required if the material transfer involves any of the following:* recombinant or synthetic nucleic acid molecules, including genetically-modified organisms.
* the use of infectious agents.
* the use of biological toxins, organisms that generate biological toxins, or recombinant or synthetic nucleic acid molecules that can be used to express biological toxins.
* the use of human blood, blood derivatives, body fluids, cell lines or unfixed tissues.
* the use of other biohazardous agents that may pose an environment risk or risk of harm to human, animals or plants.
* research on human subject participants (i.e. data, biosamples, questionnaires, or behavioral research).

**B.** Registration with the Institutional Animal Care and Use Committee (IACUC@kaust.edu.sa) is required if the material transfer involves research on vertebrate animals (including marine animals).**C.** Registration with the Institutional Radiation Safety Committee (IRSC@kaust.edu.sa) is required if the material or research project involves any ionized radiation.  |

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| 1.1 Provider Institution | [*insert institution*] |
| Contact Information of Provider Principal Investigator  | (*name, postal address,* ***email***) |

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| 1.2 Recipient Institution | [*insert Center/Division or Core Lab*] KAUST |
| Contact Information of KAUST Faculty or Core Lab Member | (*name, postal address,* ***email***) |

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| 2. Name, description and amount of material to be received: |

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| 3. Planned research (or services if Core Lab) using the material: |

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| 4. Funding source(s) for planned use or development of incoming material:  |

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| 5. Will the incoming material be used in connection with research involving an existing KAUST invention disclosure, patent or patent application? [ ]  YES [ ]  NO |
|  If YES, please identify the disclosure/patent no:  |

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| 6. Will the incoming material be used with any other materials you have obtained under an MTA?  [ ]  YES [ ]  NO |
|  If YES, please identify the agreement:  |

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| 7. Will the material(s) be used within your laboratory and/or a Core Lab? (please check ALL that apply) [ ]  Laboratory: [ ]  Core Lab:  |

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| 8. Does the person handling the incoming material for research at KAUST have the required appropriate laboratory safety training for this type of material? [ ]  YES [ ]  NO |

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| 9. Has the research project(s) involving listed material required approvals from (check ALL that apply):[ ]  Institutional Biosafety and Bioethics Committee? IBEC Approval #: [ ]  Institutional Animal Care and Use Committee? IACUC Approval #: [ ]  Institutional Radiation Safety Committee? IRSC Approval #: [ ]  Not applicable. The material does not require approval by any of the committees listed above nor any other research use pre-approvals. |

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| 10.1 What is the cost of the material payable to the Provider? $ |
| 10.2 Who pays for the cost of the transfer? [ ]  Provider  [ ]  KAUST |
| 10.3 If KAUST pays for the material or its transfer, please name cost center:  |

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| 11. Will the research result in a modification of the material? [ ]  YES [ ]  NO |

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| 12. Please tick one of the two boxes below: |
| [ ]  If necessary to obtain the material described above, I request that KAUST grants reasonable intellectual property rights to derivatives or improvements that are required by the Provider as a condition of the MTA. |
| [ ]  If the Provider will provide the material on the condition of obtaining rights to any invention or modification which I may make, I do not wish to obtain the material from this source. |

*I certify that the information I have provided is accurate. Furthermore, as the Recipient of materials I certify that I will direct this project in compliance with KAUST policies, with the terms and conditions of KAUST’s agreement with the Provider and with all applicable laws and regulations, including, but not limited to the safe shipping and handling of biohazards.*

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| *If MTA Requester is from a Center or Division:***FACULTY** Name: | Signature/Date:  |
| *If MTA Requester is from a Core Laboratory:***APPROVED BY DIRECTOR CORE LABS**Name: Daniel Acevedo Feliz | Signature/Date: |

*Once completed, please print and get this form signed, scan it in and email it to Research Funding and Services, email:* *MTA@kaust.edu.sa*

***Further process to receive the incoming material:*** *Once the MTA is fully signed, you need to complete the invoice template at* <https://procurement.kaust.edu.sa/Pages/ExportShippingRequest.aspx> *and advise Procurement on the details of the incoming shipment, including which cost center or pocket ID the shipment should be charged to, even if the transfer itself if free-of-charge. The completed invoice needs to be put on the providing institution’s letter headed paper and sent to* *Procurement.Permits@kaust.edu.sa* *who will then arrange for customs clearance.*