

UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER

Material Transfer Agreement (MTA) Questionnaire – **UNM to Receive Material**

PreAward # HSC	Date Rec'd:	
UNM Faculty: Phone: Department Name:		Planned start date for research:
Provider Name Provider's PI:		Provider Address: Phone: Email:
Name and Quantity of Material (brief description of scientific/technical nature of Material):		
List type of funding, project title, account, proposal and/or grant number (as applicable):		

YES NO

1.	Is material to be used on another research project?		
2.	Is material of human origin?	If "No" skip to question 3	
2a.	Has project been submitted to IRB?		
2b	Does project have IRB approval		
3.	Does the research collaborate with others?		
4.	Will Material be modified or a new substance created?		
5.	Is the Material to be used strictly for testing purposes?		
6.	Is the Material a known biohazard?		
7.	Is any new IP anticipated from the research?		
8.	Is the Material a select agent? Select Agent list if yes, fill out ECES form		
9.	Is the Material available from another source?		
10.	Is the Material being purchased from a repository?		
11.	Have you received the Material already?		
12.	Will research involve <i>in vitro</i> experiments? (outside a living organism)		
13.	Will research involve <i>in vivo</i> experiments? (within a living organism)		
14.	Is the Material supplier located outside the U.S.? ECES Form		
15.	Are there any publication restrictions? Fundamental Research Exclusion ; if yes, fill out ECES form		
16.	Will foreign nationals work on the project? Foreign Nationals , if yes fill out ECES form		
17.	Is foreign travel planned? ECES Form		
18.	If foreign supplier, is only a proposed manuscript and/or presentation to be sent?		

Please provide any additional information (e.g. costs >\$5000, unique circumstances, collaborators' names, alternate suppliers) which may assist expediting the MTA

- **Please note: If any of the red boxes are checked the additional [Export Control Exclusion Screening Form](#) (found on the PreAward website <http://hsc.unm.edu/financialservices/preaward/> under "Just the Forms" tab) is required with the submission of this form.**

MTAs will not be accepted without this form

When complete, please submit to HSC-PreAward@salud.unm.edu or interoffice to HSC Financial Services, MSC09-5220
Revised 04/29/13