## OUTGOING MATERIALS QUESTIONNAIRE

UT Investigator Name:
Recipient Institution Name:
Recipient Institution Email:
Recipient Investigator Name:
1. Description of the material to be provided:
2. Description of how the material will be used:
3. What source of funding supported the research from which the Material resulted? Internal External If external, name of sponsor <u>and</u> Grant No./Agreement Date or R-account No. / If internal, list source:
4. Is the material the subject of or relevant to an Invention Disclosure with UTRF? Yes No If no, should it be? Yes No
If yes, please provide information related to the disclosure, i.e. title, description, number, etc.
<ul> <li>5. Was this material made using any other material received from any third party, including any commercial or non-profit provider, university, or institution where the PI or co-PI was formerly employed? Yes No  If yes, is there a contract or any correspondence related to the use of that material? If yes, please attach.</li> <li>5. Will this research involve the production of derivatives, modifications, progeny, or any other new or modified substances Yes No If yes, please explain:</li> </ul>
Should UT retain any rights to such material(s)? Yes No
6. Do you anticipate any inventions will be developed or arise from the Reciepient's use of this material?  Yes No If yes, please explain:
7. Is there any reason to restrict Reciepient's publication rights regarding this material? Yes No
8. Will any UTK students be involved in this research? Yes No
9. Will this research involve the use of hazardous materials? Yes No If yes, you <u>must</u> complete page 2 of this form.
10. Are you or anyone involved in the production of the material affiliated with the VA? Yes No
Safety Officer Determination: Approved Not Approved
Safety Office Approval Signature(s)  Date

## **Hazardous Materials Questions**

Complete this page <u>ONLY</u> if you answered 'yes' to question 10 on page 1. Below, please indicate whether the requested materials contain any of the following. Check all that apply.

1. Check the box beside each biological hazard the materials contain.

Microbiological agents

Recombinant/synthetic nucleic acids

Biological toxins or venoms

Blood/tissue/body fluids derived from humans or animals

Plants or plant extracts

Other – Please list:

2. Check the box beside each chemical hazard the materials contain.

Reagents

Corrosives

**Poisons** 

**Explosives** 

Flammables

Carcinogens

Other – Please list:

3. Check the box beside each physical hazard the materials contain.

High pressure equipment/pressurized containers

Electrical/high-voltage

Capable of generating noise > 95 dBA or sub-radio frequencies

Cryogenic

Other - Please list:

4. Check the box beside each radiological hazard the materials contain.

Radioisotopes

Sealed sources

X-ray producing machines, including XRF/XRD and particle accelerators

Instruments with radioactive sources

Class IIIB/IV laser systems

Other – Please list:

Additional Safety Officer Comments: