



Affirmation Memo for Non-Material Transfer Agreements

TO: _____
(Grant & Contract Officers Name)
Sponsored Program Administration, 5057 Woodward Avenue, 13th Floor, Detroit, Michigan 48202
Phone: (313) 577-3726, Fax: (313) 577-5055

FROM: _____
Investigator's Name

RE (Sponsor/Study/Protocol): _____

Attached please find a copy of the agreement for the above referenced study. I have completed and signed this memo so that it may be attached to the agreement when sent to the Office of the General Counsel for review and approval.

I have paid particular attention to any clauses on intellectual property, proprietary or patent rights, publication rights and debarment and understand that the terms of the contract may require giving up certain ownership rights.

Having read the agreement, I am answering the following questions:

- 1. Do you understand and agree to the terms of the agreement? Yes No
Note: If you disagree or do not understand the terms, please describe items of concern on a separate page.
2. Did you write the protocol/scope of work for this study? Yes No
3. Will any of the work for this study be taking place in DMC-owned space? Yes No
4. Will any of the work for this study be performed by non-WSU staff? Yes No
If yes, who are the staff employed by?
5. Do you agree to carry out any responsibilities set forth in the agreement with regard to debarment and exclusion list screening? Yes No
6. Does this study involve the use of federal funds either directly or by flow-down through other agencies? Yes No
7. Will the sponsor be providing equipment for this study? Yes No
If yes, will the equipment be WSU owned or Sponsor owned at the conclusion of the study?
8. Is a patentable discovery likely to come out of your work? Do Not Know Yes No
9. Will the project involve the use of proprietary materials of another party besides the sponsor? If yes, please explain on a separate page. Yes No
10. If you are receiving material, is it a threat to people or the environment if released? If yes, please explain on a separate page. N/A Yes No
11. Does handling of any materials require more than the standard laboratory precautions or safety measures? If yes, please explain on a separate page. N/A Yes No
12. Will you be subcontracting with other institutions for this project? Yes No
If yes, please provide names and briefly describe the collaboration:

Signature of Investigator Date