INTAKE FORM DATA TRANSFER AND USE AGREEMENT (Funded) THE UNIVERSITY OF TEXAS RIO GRANDE VALLEY

THIS IS <u>NOT</u> A DATA TRANSFER AND USE AGREEMENT (DTUA)

Information provided on this form will help the Office of Research Contract & Industry Agreements (CIA) develop an agreement. Please complete and return to CIA at rcia@utrgv.edu.

UTRGV INFORMATION

UTRGV Investigator (PI):		
Department:	Building & Room	m:
Email:	Phone:	
Administrative Contact (if different	from PI):	
Title:	Email:	
For this agreement, I am (please che	ck one):	
Providing Data		
Receiving Data		
Both Receiving and Providing	g Data	
	OTHER PARTY INFORMATION	
Firm or Institution:		
Address:		
Primary Contact Name:	Title: _	
Email:	Phone:	
Additional Contact (if different from	Primary Contact):	
Title:	Email:	
Additional Contact:		
Title:	Fmail:	

PROJECT INFORMATION

1. PROJECT/STUDY TITLE:		
2. TYPE OF PROJECT/STUDY (Check all that apply):		
De-identified Data about Human Subjects		
Limited Data Set		
Personally Identifiable Information - Common Rule Only		
Personally Identifiable Information - HIPAA		
Personally Identifiable Information - FERPA		
3. DESCRIPTION OF THE PROJECT (Include the following details):		
(a) Purpose of project		
(b) Subject population		
(c) Method(s) used to gather data		
(d) Method(s) used to store data		

Provide sufficient information such that each party understands the project and what the Recipient will perform using Data. Include whether the Recipient is permitted to link the Data with other data sets.

If applicable, include any special disposition requirements related to the linked data sets.

4. DESCRIPTION OF DATA TO BE EXCHANGED (Include the following details):

- (a) Type of data collection
- (b) Data collection methods
- (c) Data analysis plan
- (d) Method on how data will be transferred
- (e) Method of disposition or archiving of data after completion of the project

Provide sufficient information such that each party understands the information that will be transmitted under this Agreement. Please attach a copy of the protocol.

5. l	DOES THE PROJECT INVOLVE THE USE OF DATA ABOUT A HUMAN SUBJECT? YES NO			
	5a. If YES, does the research meet the definition of human subjects research?			
	NO. PI and/or IRB determined that project is not human subjects research.			
	YES. (Indicate status of IRB protocol below):			
	IRB protocol has not been submitted yet			
	IRB protocol review is Pending			
	Approved IRB Protocol number:			
	Please attach an IRB approval letter with all other documents attached with application.			
	5b. If NO, why do you believe an agreement is required?			
	Other party requires agreement			
	Data is proprietary			
	Data is export controlled			
	Other (please explain further):			
6. D	PATA DELIVERY METHOD.			
	Electronically			
	By Mail			
	Other, please describe:			
7. V	VILL DATA TRANSFER BE CONDUCTED THROUGH AN OUTSIDE ENTITY'S SOFTWARE? YES NO			
	7a. If YES, sign-off is required from Information Security department. Check the status below:			
	Not required			
	Not yet submitted			
	Review and sign-off pending			
	Sign-off received			
	Please attach relevant documentation received from Information Security.			
8. V	VILL ANYONE OUTSIDE OF YOUR RESEARCH GROUP OR UTRGV REQUIRE ACCESS TO DATA?			
•	NO			
	YES, please describe:			
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9. ARE THERE ANY FUNDING SOURCES FOR THIS F	PROJECT?	
NO		
YES, please list:		
10. ARE THERE ANY OTHER AGREEMENTS THAT A	RE RELATED TO THIS PROJECT?	
NO		
YES, please describe:		
11. IS THERE ANY DATA COMING FROM SOURCES OUTSIDE OF THE US?		
NO		
YES, please list country(ies) of origin:		
12. ADD OTHER INFORMATION YOU MAY NEED THE REVIEWER TO KNOW (Such as project deadlines):		
To the best of my knowledge, the above information is true and correct.		
Signature:	Date:	
UTRGV Investigator		

 ${\it If there are any questions regarding agreement, please email\ rcia@utrgv.edu}.$