INTAKE FORM NON-DISCLOSURE AGREEMENT THE UNIVERSITY OF TEXAS RIO GRANDE VALLEY

THIS IS NOT A NON-DISCLOSURE AGREEMENT (NDA)

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:	
Email:	Phone:	
Administrative Contact (if different from	om PI):	
Title:	Email:	
	OTHER PARTY INFORMATION	
Firm or Institution:		
Address:		
Primary Contact Name:	Title:	
Email:	Phone:	
Additional Contact (if different from F	Primary):	
Title:	Email:	

DISCLOSURE INFORMATION

1. What is the purpose of disclosing this confidential information?

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2. For this agreement, I am (please check o	ne):	
Sharing confidential information.		
Receiving confidential information.		
Both sharing and receiving confidentia	al information.	
3. List any related project, proposal, or agree	eement:	
 Provide additional details (e.g., site visit, meeting, etc.): To the best of my knowledge, the above information is true and correct. 		
Signature:	Date:	
UTRGV Investigator		
Acknowledged without objection.		
Signature:	Date:	
Department Chair (initials)		
Signature: Associate Dean for Research (initials)	Date:	
Associate Deali for Research (Illittals)		

If there are any questions regarding agreement, please email rcia@utrgv.edu.