

Non-Disclosure Agreement Information Sheet

To help expedite your NDA request, please fill out this form as accurately and completely as possible. If you have any questions, please email spscontr@purdue.edu.

Once you click the Submit button, an email will be generated with this completed NDA Info Sheet as an attachment. Please make sure to update the Subject Line of the email and include any additional helpful information in the body of the email. If you have any relevant documents to submit with the NDA Info Sheet, such as a company NDA that they provided, please attach it to the email as well.

If you have an urgent request, please state the timeframe clearly in your email. If the NDA is urgent, please mark your email as high priority (red exclamation point) and include "URGENT" in the Subject Line.

Date of Request: _____ Date NDA needed: _____

(The Primary Recipient, most commonly the Principal Investigator of the potential research project, will be primarily responsible for Purdue's compliance with the terms of the agreement. Failure to adhere to the terms of the agreement could lead to both institutional liability and individual consequences. The Primary Recipient identified below will be required to provide a signature on the NDA acknowledging that they agree to abide by the terms of the NDA)

Primary Recipient: _____
Email Address: _____ Campus Phone Number: _____
Campus Address: _____

- Is the primary recipient of Confidential Information a U.S. Citizen or lawful permanent resident? Yes No

Other Party Name: _____
Other Party Address: _____
Technical POC Name: _____ Technical POC Email: _____
Contractual POC Name: _____ Contractual POC Email: _____

- Has the Other Party Provided a draft agreement? Yes No
If yes, please email a copy to spscontr@purdue.edu
- Is the Other Party a U.S. Person* Yes No

*In addition to individuals who are U.S. Citizens or lawful permanent residents, a U.S. Person is any corporation, business association, partnership, society, trust, or any other entity, organization or group that is incorporated to do business in the U.S. It also includes any governmental (federal, state or local), entity.

- Once received, will anyone other than the Primary Recipient be granted access to the information? Yes No
If yes, please list name(s) and role(s) of the individual(s) and if they are a U.S. Citizen or Permanent Resident.

Name	Role (e.g. Faculty, Staff, Student (grad/undergrad), Visiting Scholar, Adjunct)	U.S. Citizen or Permanent Resident?

Note: It is the responsibility of the Primary Recipient to ensure that all persons who are granted access to the information aware of its confidentiality, authorized use, and the terms of the agreement.

Please answer all the following questions:

1) What is the purpose of the exchange (be specific):

2) Will the information be used as part of a funded project? Yes No
If yes, please provide the grant number: _____

3) What information (field and type) will be shared (be specific)

- 4) Will you receive, access, or generate technical data or equipment specifically designed or developed for military or space applications? Yes No

If yes, please explain:

- 5) Does the Primary Recipient currently have an approved outside activity that has an actively managed conflict of interest plan? Yes No

If yes, please explain:

- 6) Who will be disclosing confidential information? Purdue Other Party Both

- 7) Description of Purdue Confidential technology/information to be disclosed (if applicable)

- 8) If applicable, Has the confidential technology been disclosed to the Office of Technology Commercialization? Yes No

- 9) If 8 is yes, please provide the following.

OTC Assigned reference number and Title: _____

Please list the name, role, and citizenship of the individual/entity: _____

- 10) Is the exchange of confidential information related to any current or future activity with the Purdue Applied Research Institute (PARI)? Yes No

If yes, please explain: