

AGREEMENT APPROVAL

(NOTE: DO NOT USE FOR SPONSORED PROGRAMS AGREEMENTS)

COMPLETE THIS FORM AND RETURN TO THE OFFICE OF SPONSORED PROGRAMS AND RESEARCH INTEGRITY (OSPRI) AT osp@uccs.edu OR UNIVERSITY OFFICE PARK, 1867, SUITE 202.

QUESTIONS SHOULD BE ADDRESSED TO GWEN GENNARO AT ggennaro@uccs.edu OR 719-255-3153

1. **New Modification Renewal Other**
2. **Agreement with (name organization)**
3. **Type of Agreement:**
 Space/Equipment use Non-Disclosure Other
 Sponsorship Teaming
 Fee for Service Material Transfer

4. **Brief description of purpose:**

5. **UCCS Department/College:**

6. **UCCS Department/College/Unit Responsible Party:**

Name:

Phone:

Fax:

Email:

7. **External Organization's Party Point of Contact:**

Name:

Phone:

Fax:

Email:

Address:

8. Start date: _____ End date: _____
9. To assist you and OSPRI in analyzing this agreement to determine the applicability of export controls, this project will:
- a. Involve participation of foreign nationals/entities? Note: this includes individuals (including paid or unpaid students working in your lab) who are not U.S. citizens or do not have permanent U.S. residency.
No Yes
 - b. Involve travel to or visitors from a foreign country? No Yes
 - c. Involve the delivery of hardware, software, materials or biologicals to a foreign national/person and/or country? No Yes
 - d. Involve the purchase of material or equipment from a foreign vendor?
No Yes
 - e. Involve the exchange of written or verbal data or reports with a foreign national/person (could include foreign students sharing space where the project is being conducted, communications via email, etc.)?
No Yes
 - f. Require the use of another party's proprietary (restricted) information or materials? No Yes
 - g. Have publications restrictions and/or require sponsor prior approval of publications? No Yes
 - h. Have foreign national restrictions and/or require sponsor prior approval of foreign nationals working on the project? No Yes
 - i. Subject to International Traffic and Arms Regulations (ITAR) No Yes

10. Additional comments:

11. Exceptions/corrections to the proposed Agreement:

APPROVALS TO BE OBTAINED BY DEPARTMENT/COLLEGE/UNIT:

I have read and approve the Agreement, with any exceptions noted in #10 above, and agree to comply with all terms and conditions.

Department/College Responsible Party

Date

I confirm the contract is consistent with the objectives of my unit, I am aware of all requirements of this Agreement and I am committed to providing them.

Chair

Date

Dean/Director/Unit Head

Date

Assistant/Associate Vice Chancellor or Vice Chancellor, if applicable Date

APPROVALS TO BE OBTAINED BY OSPRI

Executive Director
Office of Sponsored Programs and Research Integrity

Date

Legal Counsel, if applicable

Date

Risk Management, if applicable

Date

Technology Transfer Office, if applicable

Date