

INDUSTRY PROPRIETARY INFORMATION DISCLOSURE AGREEMENT CHECKLIST

For Internal Use Only: Date Log No

Penn State Contact:

Address:

Tele:

FAX:

Email:

Company Name:

Company Contact:

Address:

Tele:

FAX:

Email:

1. Do you plan to meet with the Company? Yes No If yes, when:
2. Is there another Disclosure Agreement with the Company, i.e. executed or in process? Yes No
3. Is collaborative research planned with the Company? Yes No
4. Do you plan to submit a proposal? Yes No If yes, when:
5. Who will be receiving/disclosing information? Penn State to Co. Co. to Penn State Both
6. Is it mandatory to receive this information from the Company? Yes No
 - a) Will the confidential Information conflict with your ongoing research?
 - b) Has an invention disclosure been submitted to Intellectual Property Office (IPO) which relates to the confidential information to be disclosed?
 - c) Could the research be conducted without this information?

7. Give a brief (one sentence) description of confidential information to be disclosed under the terms of this Agreement:

Penn State's Technology/Information (Article 2):

Company's Technology/Information (Article 2):

Signature of Principal Investigator

Name Printed

Date

Budget/Fund for Mailing Documents

Signature of Research Dean/
Administrative Officer

Date

Approved: Yes No