



**UNIVERSITY**

**COMPANY**

MSU Employee Name:  
MSU ID#:  
MSU ORG Name:  
MSU ORG #:  
Mailstop:  
Phone:  
Email:

Company Name:  
Address:  
City/State/Zip:  
Contractual POC:  
Email (required):  
Technical POC:  
Email:

**AGREEMENT INFORMATION**

Title:

Start Date:

End Date:

Fund Code Type:  
(For report purposes)

Agreement Type:

If Other, please describe:

**GENERAL INFORMATION**

YES NO

- Is there a deadline to have the agreement signed?      Deadline Date:
- Have you been involved with any other agreement with the Company? If yes, please specify:
  
- Is this agreement related to an existing research agreement, or is the intent that it will lead to one in the future?
- Are you a U.S. Citizen? If no, please indicate your current status:
- Will you be sharing any Company confidential information with foreign students or other foreign nationals?

**APPROVALS**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dept Head/Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean/Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
OSP Signature

\_\_\_\_\_  
Date